

**FAMILY ROUTINES DURING THE ADJUSTMENT AND ADAPTATION PROCESS  
OF THE TRANSITION TO PARENTHOOD**

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Thesis presented in fulfilment of the requirements for the degree of Master of Arts and Social  
Sciences (Psychology) at the University of Stellenbosch



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March 2012

## DECLARATION

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## SUMMARY

The family life cycle perspective (McGoldrick & Carter, 2003) recognises that one normative life stressor for families is the transition to parenthood. Still, the *Resiliency Model of Family Stress, Adjustment and Adaptation* (McCubbin & McCubbin, 1996) holds that one protective resource that could help the family in the face of a stressor is family routines. Even though the Ecological-cultural Niche Model (Gallimore, Goldenberg & Weisner, 1993) gives us some understanding of the family routine as a psychological construct, many gaps exist in the literature. The aim of this qualitative grounded theory study was to better understand family routines as a resilience resource during the transition to parenthood. This aim was broken down into five research questions: (1) *What do daily routines look like in the lives of first-time parents?* (2) *Why are these family routines important to first-time parents?* (3) *What challenges do first-time parents face in sustaining their daily routines?* (4) *What assists first-time parents in maintaining their daily routines?* (5) *What accommodations do first-time parents make to adapt to the arrival of their first child?* In terms of methodology, ten Coloured couples whose first child was between one and four years of age and who resided in one northern suburb of Cape Town took part in semi-structured interviews. In terms of research question one, the data analysis revealed that family routines look like a sequence of unfolding activities and that this sequence is situated within a temporal structure; that the specific sequence and temporal structure are designed by the family to be functional; but that there also is temporal incongruence in the sequence of routines. Related to question two, the participants felt that their routines were important because a family routine is an opportunity to spend time together, and it is an opportunity for improving child development. For question three, the data analysis revealed that the challenges first-time parents face in sustaining their routines are extra-familial and intra-familial barriers that increase the task and temporal complexity of routines. The analysis of question four revealed that what assists

parents in maintaining routines are extra-familial and intra-familial resources that decrease the task and temporal complexity of routines. Lastly, themes related to research question five showed that the accommodations that parents make in routines that help them adapt are temporal accommodations and idiosyncratic accommodations. In future, researchers and theorists should not only investigate an individual family routine in isolation (e.g. just dinnertime or just bedtime), but also look at the structure of the entire daily schedule, the scheduling process, and how the functionality of this daily schedule affects the experience of individual routines. Greater emphasis should also be placed on diverse samples from many ecological and cultural contexts in order to identify more extra-familial and intra-familial barriers and resources that affect the maintenance of a satisfying daily schedule.

Key words: family routines, transition to parenthood, family resilience, family life cycle, Ecological-cultural niche.

## OPSOMMING

Die gesinslebensiklusraamwerk (McGoldrick & Carter, 2003) beklemtoon dat een normatiewe lewenstressor vir gesinne die oorgang na ouerskap is. Tog dui die *Resiliency Model of Family Stress, Adjustment and Adaptation* (McCubbin & McCubbin, 1996) aan dat gesinsroetines een bron van beskerming is wat die gesin tydens 'n groot lewensstressor kan help. Al bied die Ekologies-kulturele Nismodel (Gallimore, Goldenberg & Weisner, 1993) ons 'n sekere mate van begrip van gesinsroetine as 'n sielkundige konstruk, is daar steeds leemtes in die literatuur. Die doel van hierdie kwalitatiewe gegronde-teorie navorsing was om beter begrip te ontwikkel van gesinsroetines as 'n veerkragtigheidsfaktor tydens die oorgang na ouerskap. Hierdie doel is in vyf navorsingsvrae verdeel: (1) Hoe lyk daaglikse gesinsroetines in die lewens van nuwe ouers? (2) Hoekom is hierdie gesinsroetines belangrik vir nuwe ouers? (3) Watter uitdagings staar nuwe ouers in die gesig wanneer hulle daaglikse roetines probeer volhou? (4) Wat help nuwe ouers om met hul daaglikse roetines vol te hou? en (5) Watter akkommodasies maak nuwe ouers om aan te pas by die koms van hul eerste kind? Wat metodologie betref het tien bruin ouerpere wat se eerste kind tussen die ouderdom van een en vier jaar was en wat in 'n noordelike voorstad van Kaapstad woon aan semi-gestruktureerde onderhoude deelgeneem. Wat die eerste navorsingsvraag betref, het die data-ontleding onthul dat gesinsroetines 'n reeks opeenvolgende aktiwiteite is wat een na die ander ontvou. Hierdie reeks van roetines is geleë binne 'n tydsraamwerk; dit word deur die gesin ontwerp om funksioneel te wees; maar daar bestaan ook tyd-inkongruensies in die reeks roetines. In verband met vraag twee het die deelnemers gevoel roetines is belangrik omdat dit hulle die geleentheid bied om tyd saam deur te bring en dit verskaf ook 'n geleentheid om die ontwikkeling van die kind te bevorder. Op grond van die derde navorsingsvraag het die data-ontleding getoon dat die uitdagings wat nuwe ouers in die gesig staar wanneer hulle probeer om hulle gesinsroetines te volhou, buite-gesins en binne-gesins hindernisse is wat take

bemoeilik en tyd-kompleksiteit verhoog. Ontledings na aanleiding van vraag vier het getoon dat dit buite-gesins en binne-gesins bronne is wat help om take makliker te maak en tyds-kompleksiteit te verminder sodat nuwe ouers met roetines kan volhou. Laastens, temas wat na vore gekom het na aanleiding van die vyfde navorsingsvraag toon dat dit tyd- en idiosinkratiese akkommodasies is wat ouers help om aan te pas. In die toekoms moet navorsers en teoretici nie net 'n individuele gesinsroetine in isolasie bestudeer nie (bv. net 'n aandete-roetine of net 'n slapenstyd-roetine), maar ook kyk na die struktuur van die hele daaglikse skedule, skeduleringsprosesse, en hoe die funksionaliteit van hierdie daaglikse skedule die ervaring van individuele roetines beïnvloed. Meer klem moet ook geplaas word op steekproewe vanuit ekologies en kultureel diverse kontekste ten einde meer buite-gesins en binne-gesins hindernisse en bronne wat die instandhouding van bevredigende skedules beïnvloed, te identifiseer.

Kernwoorde: gesinsroetines, oorgang na ouerskap, gesinsveerkragtigheid, gesinslebenssiklus, Ekologies-kulturele nis.

## ACKNOWLEDGEMENTS

It takes a whole village to raise a child and this thesis was surely my little baby. I would like to thank, from the bottom of my heart, the following people who not only guided me, but gave me courage, hope, and love:

Firstly, Andries my love, you know I would never have survived this without you. You are my rock. Words are so inadequate but to know you and to be able to love you is the biggest blessing I could ever wish for.

Then, Prof. A. P. Greeff, thank you for guiding and supporting me and being the kind of person with whom I can just be myself. I am so grateful that I have you as a mentor. You inspire me not just to be a good student, but to be a better person.

To my two loving parents I want to say thank you for your wisdom, for believing in the three of us and pushing us so that we keep growing. You inspired us to dream and then gave us the tools to reach those dreams.

Ems en Steve, I love you two so much! It has been a privilege to see you two develop into such amazing young adults. You are like a brother and sister to me.

To “Oom Andrè” en “Tannie Felicity”: to have an extra pair of parents like you is a gift from God. Thank you for loving so openly and unconditionally.

Lastly, thank you to Whisky, Milky, Dexie, and Gingie for keeping my feet and bed warm while I sit in front of the computer.

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## **CHAPTER ONE**

### **INTRODUCTION TO, MOTIVATION FOR AND AIMS OF THE STUDY**

#### **1.2 Introduction**

Because of changing cultural norms and the evolution of reproductive technology, the transition from childlessness to parenthood is not exclusively reserved for the traditional nuclear family, but is a life event experienced by individuals from various family forms. Thus, parenthood is a challenge also undertaken by some unmarried couples, single adults, adopting families, co-habiting intergenerational families, divorced families, remarried families, and families headed by same-sex partners. However, for centuries it has been an expected and predictable life event for most married, heterosexual couples. Thus, because of social, physiological and psychological tendencies, the transition to parenthood is one developmental phase that most individuals will experience in their life time (Cowan & Cowan, 1995).

However, very few normative transitions have such deep and far-reaching consequences within the nuclear family. Although this period is often perceived as a positive life change for couples, there is always an element of discomfort experienced by the individuals involved. This discomfort is produced because the family has to discard old relational arrangements that are no longer adaptive, yet it has no guide for establishing new, functional patterns of interaction (Cowan & Cowan, 2003). Fifty years of research have established that there is a moderate decline in functioning during this period, elevating the risk for distress and dysfunction in the various domains of family life (Cowan & Cowan, 1995; Cowan & Cowan, 2003; Grochowski & Karraker, 2006; Knauth, 2001; Worthington & Buston, 1987). Because of this disequilibrium within the family unit, some researchers have suggested that this life

stage represents a normative *crisis* (LeMasters, cited in Cowan & Cowan, 2003). Many couples experience conflict; they are exhausted, disillusioned, unsatisfied and unhappy because of the new demands on the system. The addition of a child often exacerbates already problematic relationships, escalating marital trouble experienced in previous developmental stages (Cowan & Cowan, 2003). Suggestions have been made that this period is a prime time for marital and relational intervention because the risk for divorce is a substantiated one (Cowan & Cowan, 1995). The stress and distress within some families may have long-term negative implications for the development of its members if parents cannot cope, rebound and recover from the crisis.

However, the term *crisis* might be an oversimplification and could place undue emphasis on the negative aspects of this life event (Cowan & Cowan, 2003). This developmental phase may also hold the potential for the family to thrive and flourish, as will be demonstrated in the sections to come. Research shows that the impact is not *as* negative for some because of various protective factors. Parents may mature, acquire new coping skills and move to higher levels of functioning if the family utilises its resources and adapts and adjusts successfully.

One recognised protective resource that could play a major role in how well a family adjusts and adapts to stressful life events is the family's set of routines (Black & Lobo, 2008; Fiese et al., 2002; Fiese, Hooker, Kotary & Schwagler, 1993; Greeff & Du Toit, 2009; Greeff & Wentworth, 2009; Howe, 2002; McCubbin & McCubbin, 1996; Walsh, 2003). However, although there is an established link between healthy family routines and successful adaptation after adversity, international research on family routines is still in its infancy. Very few international research studies address how parents utilise and change their daily routines in order to cope with stressful life events. The exception to this is Shultz-Krohn (2004), who investigated how families utilise and make meaning of family routines while living in a

homeless shelter. Similarly, Maul and Singer (2009) focussed on the adaptation of family routines in response to having a child with severe developmental delay. Although these contributions highlight how family routines may play a role in atypical circumstances, research does not reveal how routines are utilised in families experiencing a normative life event.

It is also unclear which intra- and extra-familial factors could affect the use, development and maintenance of such routines, because comprehensive theories on family routines are almost non-existent and the models that do exist, such as Ecological-cultural Niche Theory (Gallimore, Goldenberg & Weisner, 1993; Weisner, Matheson, Coots & Bernheimer, 2004), are insufficient in detail. Thus, when trying to conduct research it is unclear which factors should come under investigation. Family income, parental personality, child temperament, the involvement of friends, larger community influences, work schedules, the child-readiness of parents, parents' education level, cultural background, past experience, and the couple relationship are but a few possible variables to choose from. Without a comprehensive theoretical model to guide such a research study, the researcher would have to arbitrarily choose a handful of these variables to investigate. Such a methodological hurdle could exclude important findings.

Furthermore, research on the daily routines of different cultural groups in South Africa is scant, and research that focuses exclusively on South African families' routines during the *transition to parenthood* is non-existent. Thus, little is known about what family routines are like within a South African context, why these routines are important to South African parents, what challenges families face in maintaining their routines, what assists families in managing their daily routines, and what accommodations South African families make to positively adapt to their new child. Since family routines are usually highly specific to the

cultural and ecological environment within which the family lives (Gallimore et al., 1993), research on family routines must take the family's cultural context into consideration. This qualitative, grounded theory research study is a step towards addressing this gap in the literature. The study aims to understand more about family routines, as a process, in the adjustment and adaptation period after the transition to parenthood.

This chapter will, firstly, discuss why the knowledge gained from this research is beneficial, and thus what motivated the research focus. Secondly, the aims of the study are presented, followed by a discussion of the layout of this thesis.

## 1.2 Motivation for the Study

The motivation for this study rests on the observation of two equally important premises. The first is of a practical nature and deals with effective intervention planning for couples becoming parents. The second motivation deals with the benefits of using a strengths-based approach in research, rather than a focus on family deficits.

*Firstly*, in America, almost half of all divorcing couples who have children do so before their child goes to kindergarten (Cowan & Cowan, 2003). Because of a lack of research in this area, it is unclear how many South African couples divorce after the transition to parenthood. However, even if the situation does not end in divorce, a decline in relational quality and an increase in marital conflict still hold negative developmental implications for children (see Davies & Cummings, 1994; Fincham, 1994; Fincham, Grych & Osborne, 1994). When parents struggle to adjust to parenthood as individuals and as a couple, it forecasts what kind of relationship they will develop with their child during the preschool years (Cowan & Cowan, 1995). The quality of this parent-child relationship predicts the cognitive, emotional and social adjustment of the child in elementary school (Cowan & Cowan, 1995, 2003). But

developmental difficulties are not limited to elementary school. In intact families with high levels of marital conflict, children are at greater risk of displaying problematic internalising and externalising behaviours, and may also experience emotional disturbance when they reach adolescence and adulthood (Fincham, 1994; Purcell & Kaslow, 1994). The quality of the marital relationship also has a spill-over effect from generation to generation, where the quality of the parental relationship affects the quality of children's future, adult intimate relationships (Amato & Booth, 2001). When situations do lead to divorce, research documents children's increased risk for conduct disorders, lower self-esteem, more difficulties with peers, depression, substance abuse, relationship problems, and premature sexual experiences (Anderson, 2003; Evans & Bloom, 1996; McCabe, 1997). Thus, the transition to parenthood holds considerable risk for family members if the addition of a child exacerbates interpersonal conflict and couples are rigidly organised and not flexible enough to restore equilibrium within the family unit. Because of these factors, it is a prime time for family intervention. As Cowan and Cowan (1995) explain:

If a life transition experienced by approximately 90% of contemporary married couples can be expected to be accompanied by stress and distress for many parents, it is likely that this strain will permeate some or all of the relationships in the family, which, in turn, can be expected to compromise children's optimal development. In that case, it would seem reasonable to create targeted or even universal preventive intervention programs designed to enhance parents' coping skills and reduce their stress, or to provide remedial help for couples already in difficulty when the transition begins (p. 412).

This study will give insight into how families use routines as a vehicle for supporting first-time parents. Various studies have shown the benefits of structuring family interventions within the family's unique set of routines (Bernheimer, Gallimore & Weisner, 1990;

Buschbacher, Fox & Clarke, 2004; Clarke, Dunlap & Vaughn, 1999; Duda, Clarke, Fox & Dunlap, 2008; Lucyshyn, Albin & Nixon, 1997). Such intervention programmes are more sustainable for families, because the programme is tailored to the lifestyle of the family and compliments rather than disrupts the family's daily schedules (Bernheimer et al., 1990; Moes & Frea, 2000). Interventions that are structured in and around the family's daily routines also improve upon conventional intervention programmes because parents and children are not forced into unnatural intervention settings (such as a therapist's office), or unfamiliar activities (Maul & Singer, 2009). These interventions are structured so that they occur inside the family's natural ecology and already established family activities (e.g. bath time or dinnertime). Thus, parents and children find it easier to relate to these interventions. For example, one longitudinal study, focusing on a family with an autistic child, showed that embedding an intervention approach (such as Positive Behaviour Support) within the family's daily routines resulted in a decrease in problem behaviours and an increase in the family's community participation over a seven-year period (Lucyshyn et al., 2007). The parents also reported greater social validity and contextual fit (Lucyshyn et al., 2007). Furthermore, family routines also incorporate important aspects of the family's cultural values (Gallimore et al., 1993), and structuring interventions within these routine settings thus will complement the family's belief system rather than undermine it. Families also structure their routines in such a way that they help them manage and address their economic, social and ecological challenges on a daily basis (Gallimore et al., 1993; Weisner, 2002a, 2002b). When clinicians develop interventions within and around family routines, it ensures that the intervention utilises the family's resources and does not ignore the community, institutional, environmental and economic challenges they are faced with (Gallimore et al., 1993; Weisner, 2002a, 2002b). Thus, it has been emphasised that the daily routine activities of the family should play a major role when clinical interventions are designed and should

form an important unit of analysis when conducting research (Gallimore Weisner, Kaufman & Bernheimer, 1989; Gallimore et al., 1993; Howe, 2002; Lucyshyn, Blumberg & Kayser, 2000; Mahoney & O'Sullivan, 1992; Maul & Singer, 2009; Moes & Frea, 2000). In summary, this study can help to elucidate how the family routines of a specific group of South African parents can be utilised to tailor more effective intervention programmes for this developmental stage. Programme developers can also gain a better understanding of what factors need to be focused on if they attempt to improve the family routines of first-time parents. Besides formal interventions, this research can also assist first-time parents in gaining insight into the lives of people who have gone through similar situations and how these couples managed to structure their family routines in a positive and helpful way.

The *second* motivation for this study deals with the concept of resilience. The concept of resilience echoes the salutogenic perspective of health (including physical, mental and social health), first introduced by Antonovsky (1996). This orientation discards the pathogenic idea that health is a dichotomous variable, where people are classified either as healthy or unhealthy (Antonovsky, 1996). Rather, it sees health and well-being on a continuum (Langeland, Wahl, Kristoffersen & Hanestad, 2007), where the health status of individuals and families is viewed in shades of grey, rather than black and white (Walsh, 2003). The presence of pathology, or problematic behaviour, does not mean that the family is perpetually damaged and beyond resolution. The family is merely challenged by hardship, with the potential for repair (Walsh, 2003). The main aim of research in this area is to identify what makes a person move towards the healthy end of the spectrum (Langeland et al., 2007; McCubbin & McCubbin, 1996). Echoing this sentiment, the last thirty years has shown a transformation in research focus. Rather than trying to identify individual and family deficits, or risk factors and vulnerabilities that can lead to pathology, studies have become increasingly interested in the resources, protective factors and strengths that promote well-

being (Antonovsky, 1996; DeHaan & Hawley, 1996; Kalil, 2003; McCubbin & McCubbin, 1996; Walsh, 2002, 2003). Thus, there are more and more investigations into what factors make families more resilient when confronted by adverse life events. The strengths-based approach is important because it not only gives a more accurate view of health, but it also challenges therapists to identify and fortify the family's resources, mobilising them to manage the present crisis. This is in contrast with the deficit model, in terms of which the therapist is fixated on the diagnosis and the detection of what is wrong with the family (Goldenberg & Goldenberg, 2008). In other words, it focuses the attention on future potential, rather than on how the family has failed (Walsh, 2003).

Research indicates that three factors assist the recovery and healing process during therapy (Anthony, Cohen & Farkas; and Strauss, both cited in Langeland et al., 2007). These are that the participants must perceive themselves as more than a mere diagnosis and disease, explore themselves as holistic beings, and take control over their own lives (Langeland et al., 2007). Karpel (cited in Goldenberg & Goldenberg, 2008) points out that even a chaotic, dysfunctional, abusive and disorganised family has resources. Helping families identify these strengths and previously untapped resources empowers them, increasing the actual control they have over their lives, as well as their perceived control (Nelson & Prilleltensky, 2005). Building on strengths helps individuals and families to regain confidence in their own competencies and potential (Silberberg, 2001). The focus on building strengths and resilience may also have important implications for large-scale preventative interventions. The Ministry of National Health and Welfare of Canada (quoted in Visser, 2007) defines mental health as:

The capacity of the individual, the group and the environment to interact with one another in ways that promote subjective well-being, the optimal development and the use of mental abilities (cognitive, affective and relational), the achievement of



individual and collective goals consistent with justice and the attainment and preservation of conditions of fundamental equality. (p. 178)

Based on this definition, health is not merely seen as the absence of problems, but the promotion of well-being and self-actualisation. Thus, the task of clinicians is not limited to merely relieving the distress of troubled families, but should also include the promotion of optimal functioning in all individuals within society (Nelson & Prilleltensky, 2005). Preventative interventions that build on the strengths and resilience of families can heighten the quality of life of all people, rather than merely eliminating problems in some. A focus on resilience and protective resources leads to the unlocking of human potential. As Silliman (1995) points out, people who have acquired resilience skills not only cope well with stress and manage relationships better than those who have not yet mastered such skills, but also invest in and contribute to other's lives. Consequently, developing family strengths will help interventionists build a thriving human community, because it not only prevents disease and dysfunction, but also promotes development, self-actualisation and well-being (Silliman, 1995). Research that focuses on family routines will obtain much needed information on how this protective resource functions in South African families, and will be a step towards achieving this goal. Research in this area can help psychologists gain a better understanding of this psychological construct and increase our comprehension of this phenomenon during family life cycle transitions. The findings of this study can be used by clinicians to strengthen the routines of *all* families (including those in crisis and those with little distress), increasing their resilience and building on human potential.

### 1.3 Aims of the Study

The broad aim of this research study is to gain a better understanding of family routines as a resilience resource during the transition to parenthood. Thus, what does this resilience

resource look like in the lives of families going through this developmental phase, and what variables affect this phenomenon as the family adjusts and adapts to the addition of their first child? This broad research aim can be broken down into five specific research questions:

1. What do daily routines look like in the lives of first-time parents?
2. Why are these said family routines important to first-time parents?
3. What challenges do first-time parents face in sustaining their daily routines?
4. What assists first-time parents in maintaining their daily routines?
5. What accommodations do first-time parents make to adapt to the arrival of their first child?

In order to understand why exactly I chose these five research questions, one must take a closer look at the current literature available on the transition to parenthood and family routines. This literature review is presented in Chapter 2. At the end of Chapter 2 I will further elaborate on why these specific research questions were asked, and how the current literature and theory informed the selection of these five research questions.

#### 1.4 Presentation of the Research

This first chapter highlighted the problem concerning the lack of adequate national and international research on family routines during the transition to parenthood. It also presented the motivation for this study, the research aims, and the specific research questions that directed the study. Chapter 2 focuses on the three theoretical frameworks informing this research, namely the family life cycle perspective, resilience theory and ecocultural theory. In all three sections of Chapter 2, relevant literature concerning each theory will be discussed.

Chapter 3 discusses the methodology employed during the execution of the study, including the research design, a description of the participants, sampling procedures, the interview schedule, data analysis procedures, ethical considerations and methods used to ensure the trustworthiness of the research results. Chapter 4 presents the results of the data analysis and Chapter 5 discusses these results in relation to the relevant literature. Chapter 5 also presents the conclusions that could be drawn from the results, the limitations of the study and the recommendations for future research.

## CHAPTER TWO

### THEORETICAL BACKGROUND AND LITERATURE REVIEW

The instigation of this research study did not happen in a theoretical vacuum, but was informed by prior research within the broad spectrum of family psychology. This chapter is divided into four sections. The first three sections focus on the dynamics of family life, whereas the fourth focuses on the construct of family routines. More specifically, the first section of this chapter discusses the family life cycle perspective (McGoldrick & Carter, 2003). Thereafter, special attention is paid to one of the normative family developmental stages mentioned in the family life cycle perspective, namely the transition to parenthood. The third section takes a closer look at the construct of family resilience and discusses the *Resiliency Model of Family Stress, Adjustment and Adaptation* proposed by McCubbin and McCubbin (1996). The fourth section focuses on the definition of family routines and gives an overview of Ecological-cultural Niche Theory (Gallimore et al., 1993). All of the abovementioned theories focus on different aspects of family life, such as the family's progression through the various stages of life (the family life cycle perspective), processes involved in coping (family resilience), and how the cultural and ecological context can influence child development through family routines (Ecological-cultural Niche Theory). These theories complement each other in that they are all based on a systems theory perspective and view the family as a system situated within a cultural and ecological context that moves and develops through time. Finally, it will briefly be mentioned how the research questions were informed by the literature.

## 2.1. The Family Life Cycle

### 2.1.1 Historical origins of the family life cycle perspective

The family life cycle perspective proposes two equally significant premises. The first, which has its genesis in general family systems theory, is that the family is a social system. The second echoes the principles of Erikson's psychosocial theory of individual human development and holds that the family system progresses through various developmental stages throughout the life span. Combining these two means that, although family life is not a linear process but a continually interactive and cyclical one, it does exist in the linear dimension of time (Goldenberg & Goldenberg, 2008). The origins of these two premises will now be discussed.

At the advent of Psychology as a discipline, theorists mainly focussed their conceptual understanding of human behaviour and pathology on variables related to the individual, such as intrapsychic tensions or unresolved subconscious conflicts. Instigated by Freud's psychoanalytic formulations, clinicians tried to uncover and reconstruct their clients' pasts in the hope that this exploration might lead to client insight, behavioural changes and the amelioration of symptoms (Goldenberg & Goldenberg, 2008). However, in the last few decades of the 20<sup>th</sup> Century, various subfields within Psychology began to emerge that recognised the limitations of an exclusive focus on the individual (e.g. Family Psychology, Social Psychology, Community Psychology). There was a realisation that the source and maintenance of pathology could not merely be explained by these intrapsychic factors, because individuals are part of a wider network of people and affected by interpersonal processes. Individuals influence and are influenced by the people who surround them, such as families. Thus, some clinicians turned their attention away from intrapsychic dynamics and looked to transactional patterns within families. The individual was no longer the unit of analysis; the family as an entity in itself became the subject matter (Goldenberg &

Goldenberg, 2008). The 1950s are considered to be the period when this paradigm shift occurred and family therapy was initiated (Goldenberg & Goldenberg, 2008).

It was after the contributions from the fields of biology, mathematics and engineering that family theory took up a systemic perspective. Although various systemic concepts had been around for many years, systems theory developed as a defined area of study during the period following the two World Wars (Goldenberg & Goldenberg, 2008). It was the biologist Ludwig von Bertalanffy who brought together many systemic principles under one heading, namely general systems theory (Broderick, 1993). Concurrently, the mathematician Norbert Wiener and associates coined the term cybernetics, the process whereby self-directed systems re-establish equilibrium and maintain stability through feedback loops (Broderick, 1993; Visser, 2007). Wiener was especially interested in how information processing, communication and feedback mechanisms control, govern and regulate complex systems (Goldenberg & Goldenberg, 2008). These concepts were broadcast and discussed during interdisciplinary conferences held in New York, and researchers from both the physical and social sciences began to explore new ways of applying systems theory and cybernetics to their fields of study (Goldenberg & Goldenberg, 2008). Although Wiener also dabbled in it, Gregory Bateson, an English-born anthropologist and ethnologist, deserves the major credit for his contribution to reformulating psychological constructs into cybernetic terms (Goldenberg & Goldenberg, 2008). He was the first to make the analogy between the family and a cybernetic system. Bateson saw the family as a system trying to sustain stability and maintain balance through self-regulatory feedback mechanisms, and it is generally believed that he laid the intellectual foundation for the field of family systems therapy (Goldenberg & Goldenberg, 2008).

Parallel to the development of family systems theory, other theoretical influences on development also expanded. In the late 1940s, sociologists such as Evelyn Duvall and Reuben Hill first began to conceptualise the family within a developmental framework (Goldenberg & Goldenberg, 2008). The aim was to establish an account of universal experiences within family life over the life span (Goldenberg & Goldenberg, 2008). They outlined the various predictable stages through which families typically go and tried to estimate the time when most families would reach each stage (Goldenberg & Goldenberg, 2008). Many theorists have offered variations of this original outline, but clinicians and researchers increasingly turn to the comprehensive family life cycle framework offered by Carter and McGoldrick (Goldenberg & Goldenberg, 2008). This theory has embedded the family developmental framework within general family systems theory (Goldenberg & Goldenberg, 2008). Carter and McGoldrick's initial conceptualisation was formulated in 1980 and currently it encompasses a multicultural, multidimensional and multigenerational perspective, including the individual, family and sociocultural environment (Goldenberg & Goldenberg, 2008; McGoldrick & Carter, 2003). The next section will discuss the various propositions of the family life cycle theory offered by McGoldrick and Carter (2003).

### 2.1.2 The family as a system

The word *system* finds its origins in the Greek language and refers to a placing together of entities in a particular order (Visser, 2007). The system's unique features and characteristics are a result of the joining of its individual parts and how this combination is organised. These units stand in a constant relationship with one another (Goldenberg & Goldenberg, 2008). The processes and relationships between the units would not be present if the parts were unconnected (Visser, 2007). Thus, it is said that the system as an entity is more than the sum total of its individual parts (Broderick, 1993). It follows that no system could be understood if

one examines the individual parts separately, or that an individual part could be understood without taking the entire system into account (Goldenberg & Goldenberg, 2008).

Family systems theory proposes that a family is a dynamic, open, continuous, goal-orientated, self-regulating social system (Broderick, 1993). It is a network of interrelated, non-linear relationships between the individuals in the family (Visser, 2007). Each member has his/her own internal dynamics (cognitions, emotions, motives, needs, history, behaviours, temperament, etc.). When these individuals with their own internal dynamics come together, bi-directional patterns of interaction form between them (Visser, 2007). Thus, these interdependent members both influence and are influenced by each other (either directly or indirectly) in predictable ways. These predictable patterns make the family system a rule-governed system, and thus each family member learns what behaviour is permitted and what is expected of him/her (Goldenberg & Goldenberg, 2008). These rules help regulate and stabilise the functioning of the family unit (Goldenberg & Goldenberg, 2008).

Each system contains smaller subsystems within itself. The family system contains various co-existing subsystems, such as the wife-husband dyad; the mother-child dyad; the father-child dyad; and the sibling dyad (Goldenberg & Goldenberg, 2008). Various patterns of interaction, power relations, expectations and roles are present within each subsystem (Goldenberg & Goldenberg, 2008). The family system is also situated within larger suprasystems that fit together in a hierarchy, each with increasing complexity (Visser, 2007). Thus, the nuclear family system forms part of a larger extended family network, as well as broader employment and social networks. In turn, these systemic networks form part of the larger community-level system. Lastly, all of these levels are embedded within a broader sociocultural, political, economic and environmental system (Visser, 2007). Via bi-directional interactions, all of these systemic levels continuously affect one another and



impact on family life. Although each system has boundaries that differentiate it from other suprasystems, systems and subsystems, these boundaries are often abstract and relative, as opposed to concrete and tangible (Visser, 2007).

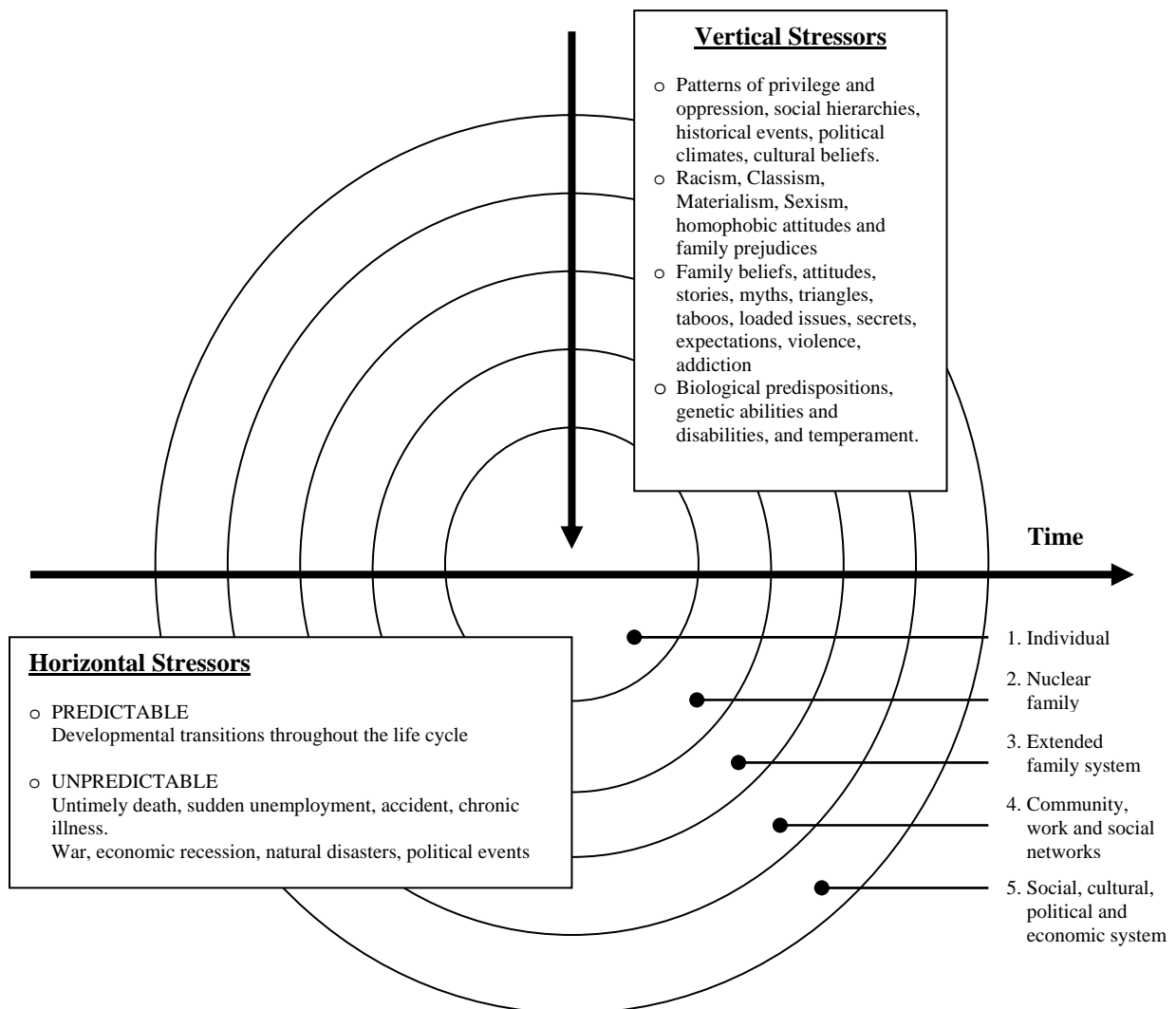
Most social systems have similar characteristics, but the family system deviates in that it has the addition of multiple generations (Broderick, 1993). Furthermore, no individual family system is alike. Each family's unique internal and external features make it distinctive from other families (Broderick, 1993). Thus, the environment (e.g. social, cultural, ecological, political and historical environment), structural features (e.g. composition, size, life stage and complexity) and individual characteristics (e.g. age, temperament, personality and health) make each individual family system unique (Broderick, 1993).

### 2.1.3 A system moving through time

Like all systems, the family system aims to maintain stability and resist change (McGoldrick & Carter, 2003). This self-regulating process is also known as homeostasis (Goldenberg & Goldenberg, 2008). Although the goal of homeostasis is obtaining a stable state of existence, it is not a static process and is achieved by continuously changing and modifying behaviour (Goldenberg & Goldenberg, 2008). These modifications occur via feedback loops: cyclical mechanisms that introduce information about the system's past functioning so that the system can alter and correct itself in order to ensure its survival (Visser, 2007). This communication process is what the term cybernetics refers to.

What makes the process of homeostasis particularly challenging is that systems move through time. Both the family system, as well as each of its distinctive members, experiences change throughout the life cycle. As the family experiences periods of transition and change it must attempt to cope with new challenges and circumstances so that it can re-establish desired

levels of functioning (Goldenberg & Goldenberg, 2008). Time can be conceptualised into two dimensions that both present the family with various potential stressors. Figure 2.1 displays these two dimensions graphically, where the vertical axis represents historical influences and the horizontal axis represents developmental influences (McGoldrick & Carter, 2003). The figure also shows the various subsystems and suprasystems surrounding the family.



*Figure 2.1.* Horizontal and vertical family stressors, adapted from McGoldrick and Carter (2003).

The vertical axis signifies intergenerational transmission (Goldenberg & Goldenberg, 2008). These are the patterns of interaction and functioning inherited from previous generations,

such as family beliefs, attitudes, stories, myths, triangles, taboos, loaded issues, secrets and expectations (McGoldrick & Carter, 2003). It may incorporate racism, classism, materialism, sexism, homophobic attitudes and family prejudices (McGoldrick & Carter, 2003). These legacies and narratives influence how family members interpret and judge new experiences and information (Goldenberg & Goldenberg, 2008). Other features included on the vertical axis are biological predispositions, such as genetic abilities and disabilities, and temperament (McGoldrick & Carter, 2003). Family violence, addiction and family emotional patterns all affect future generations (McGoldrick & Carter, 2003). On a societal level, patterns of privilege and oppression, social hierarchies, historical events, political climates and imparted cultural beliefs are all carried over and strongly increase or decrease the family's ability to obtain, sustain and maintain a state of well-being and health (McGoldrick & Carter, 2003).

In contrast, the horizontal axis describes the events experienced by the nuclear family as it progresses through life. This is divided into predictable and unpredictable developmental changes (McGoldrick & Carter, 2003). Unpredictable events include traumatic events, such as the untimely death of a family member, unexpected job loss, chronic illness, or the birth of a handicapped child (McGoldrick & Carter, 2003; Goldenberg & Goldenberg, 2008). It also includes unpredictable societal stressors, such as war, economic recession, natural disasters or social policies that may influence the family (McGoldrick & Carter, 2003). According to McGoldrick and Carter (2003), the predictable changes on the horizontal axis consist of six developmental stages that most families will experience, regardless of composition or cultural beliefs (Goldenberg & Goldenberg, 2008). Table 2.1 below displays these consecutive stages, starting with: (a) young adulthood when the single young adult leaves home; (b) the joining of two families when the young couple gets married; (c) becoming parents with young children; (d) parents with adolescents; (e) midlife, when children are launched into the world and parents move on; and (f) living together in later life (McGoldrick & Carter, 2003).

Table 2.1

*The Stages of the Family Life Cycle (Goldenberg & Goldenberg, 2008)*

Family life cycle stage	Emotional process of transition: key principles	Second-order changes in family status required to proceed developmentally
Leaving home: single young adults	Accepting emotional and financial responsibility for self	<ul style="list-style-type: none"> <li>a. Differentiation of self in relation to family of origin</li> <li>b. Development of intimate peer relationships</li> <li>c. Establishment of self in respect to work and financial independence.</li> </ul>
Joining of families through marriage: the new couple	Commitment to new system	<ul style="list-style-type: none"> <li>a. Formation of marital system.</li> <li>b. Realignment of relationships with extended families and friends to include spouse.</li> </ul>
Families with young children	Accepting new members into the system	<ul style="list-style-type: none"> <li>a. Adjusting marital system to make space for children.</li> <li>b. Joining in child rearing, financial and household tasks.</li> <li>c. Realignment of relationships with extended family to include parenting and grandparenting roles.</li> </ul>
Families with adolescents	Increasing flexibility of family boundaries to permit children's independence and grandparents' frailties.	<ul style="list-style-type: none"> <li>a. Shifting of parent/child relationships to permit adolescents to move into and out of system.</li> <li>b. Refocus on midlife marital and career issues.</li> <li>c. Beginning shift toward caring for older generation.</li> </ul>
Launching children and moving on	Accepting a multitude of exits from and entries into the family system	<ul style="list-style-type: none"> <li>a. Renegotiation of marital system as a dyad.</li> <li>b. Development of adult-to-adult relationships between grown children and parents.</li> <li>c. Realignment of relationships to include in-laws and grandchildren.</li> </ul>

(Table continues)

Table 2.1 (*continued*)

Family life cycle stage	Emotional process of transition: key principles	Second-order changes in family status required to proceed developmentally
Families in later life	Accepting the shifting generational roles	<ul style="list-style-type: none"> <li>a. Maintaining own and/or couple functioning and interests in face of physiological decline.</li> <li>b. Support for more central role of middle generation</li> <li>c. Making room in system for wisdom and experience of the elderly, supporting the older generation without over-functioning for them.</li> <li>d. Dealing with loss of spouse, siblings, and other peers and</li> <li>e. preparation for death</li> </ul>

Similar to Erikson's psychosocial theory of individual human development (Wait, Meyer & Loxton, 2005), each stage listed in Table 2.1 is marked by primary and secondary developmental tasks that must be accomplished by the family. These tasks both cause and necessitate shifts: in cognition within each individual; in the roles and tasks they must perform within the family; in the relational rules and boundaries between and within the various units (subsystems); and in the psychological and emotional distance between members (McGoldrick & Carter, 2003). Consequently, these developmental stages may cause significant distress and disequilibrium within the family (Goldenberg & Goldenberg, 2008). It is the task of the family to try to adapt to the situation and to implement the needed changes, while at the same time restoring stability and keeping appropriate aspects constant (McGoldrick & Carter, 2003). Thus, these periods are marked by a process of continuous evolution as the family seeks new steady states (Goldenberg & Goldenberg, 2008). However, family dynamics from previous stages are carried over to subsequent ones. If developmental tasks in one stage are impeded or disrupted, this may hamper the family's ability to cope

effectively with the obstacles of the next stage, thus encumbering optimal growth (McGoldrick & Carter, 2003).

It is important to note that stress experienced on the horizontal axis may be compounded and intensified if the family already experiences stress on the vertical axis (Goldenberg & Goldenberg, 2008). Vertical axis stressors (e.g. a family's excessive racial prejudices) may amplify changes on the horizontal axis (such as a daughter involved in a mixed-race relationship) and are exacerbated even more if these occur during the transition point of a developmental stage (such as the joining of two families when the couple gets married). In conclusion, the model proposes that the internal dynamics of the family system and the external influences of surrounding systems will either support or impede the ability of the family system to manage the stress caused by the convergence of the vertical and horizontal axes (McGoldrick & Carter, 2003). These factors all work together to create a state of adaptation and health, or non-adaptation and dysfunction.

This study focuses on the third predictable life stage presented in Table 2.1, namely the family with young children. In this stage, the couple's primary task is to accept a new member into the family. Secondary tasks that parents face are: shifts in the marital relationship and couple subsystem to make room for the newborn; negotiating new and appropriate familial rules and roles to accommodate new child-rearing responsibilities, financial tasks and household chores; and renegotiating relationships with extended family to include grandparenting roles (McGoldrick & Carter, 2003).

In Section 2.2, more attention will be given to this developmental phase and the changes it engenders. However, before continuing with Section 2.2, it is important to highlight a few critiques raised about the family life cycle perspective. All theories, no matter how

comprehensive, have drawbacks and thus, when utilising a theory, it is important to do so with full knowledge of these drawbacks. This will ensure that the analyst proceeds with caution and takes care to minimise potential bias in her/his investigation.

#### 2.1.4 Critique of the family life cycle perspective

This section highlights some cautions for using the family life cycle perspective. Firstly, although the model tries to portray a fairly universal prediction of the developmental course and is accommodating towards families from many geographical and cultural environments, it is based on generalisations made from a very specific context, namely twenty-first-century America (Goldenberg & Goldenberg, 2008). Thus, it does favour a very particular class, culture and historical period (Goldenberg & Goldenberg, 2008). McGoldrick and Carter (2003) acknowledge this and state:

Most descriptions of the typical family life cycle, including our own, fail to convey the considerable effects of culture, ethnicity, race, religion, and sexual orientation on all aspects of how, when, and in what way a family experiences various phases and transitions. Although we may ignore these variables for theoretical clarity and focus on our commonalities, a clinician working with real families in the real world cannot ignore them. (p. 395)

Furthermore, the model presents a theory of the development of the traditional, intact nuclear family system at a time in history when a diversity of functional lifestyles exist (Goldenberg & Goldenberg, 2008). Considering the prevalence of divorced families, single parent families, childless families, remarriage families, cohabiting same-sex couples, immigrant families, adoptive families, and co-habiting intergenerational families (Walsh, 2003), the traditional nuclear family only accounts for a fraction of experiences in family life. In South

Africa, only 42.8% of all infants (aged 0 to 4 years) have both parents living with them (Statistics South Africa, 2005). Furthermore, 38.2% of infants (aged 0 to 4 years) live in households where a grandparent is the household head (Statistics South Africa, 2005), thus indicating multigenerational families living together under one roof. To account for some of these varying family forms, McGoldrick and Carter (2003) recognise that the current divorce rate in America is estimated at 50%, which means that at least half of the American population go through one or two additional developmental phases. Thus, for divorced families, they have included the phases *divorce* and *post-divorce family* (Carter & McGoldrick, cited in Goldenberg & Goldenberg, 2008). They also include three additional phases for remarriage families (Carter & McGoldrick, cited in Goldenberg & Goldenberg, 2008). Furthermore, some researchers suggest that, in modern-day society, many couples live together before marriage, and that cohabitation thus might be a predictable developmental phase that should be added to the stage model (Smart, 2002). Rindfuss, Swicegood and Rosenfield (1987) also found inconsistencies within the predictable life course, because some young adults decide to further their education and some experience unemployment, thus changing their developmental pattern. However, in all of these cases the deviations effected minimal changes related to the transition to parenthood, and the changes were mostly related to the timing of this transition. Lastly, transitions from one stage to the next are rarely accomplished as smoothly in real life as the model portrays (Goldenberg & Goldenberg, 2008). Often, stages overlap and families have to deal with the developmental tasks concurrently.

Bearing these critiques in mind, the family life cycle model still offers researchers and clinicians an integrated, workable and organising schema for assessing a family's functioning (Goldenberg & Goldenberg, 2008). It is comprehensive in that it takes into account internal family dynamics and processes and how these processes unfold over time, as well as wider



systemic pressure and support. The manifestation of dysfunction and symptomatic behaviour is thus not attributed to individual pathology, but is seen as a family's inability to utilise available resources in dealing with wider systemic pressure, as well as horizontal and vertical axis stressors. The section that follows discusses various features of the transition to parenthood stage.

## 2.2 The Transition to Parenthood

As discussed in the previous section, when partners become parents for the first time they are said to experience a major normative life transition (Cowan & Cowan, 2003; McGoldrick & Carter, 2003). This section further elucidates what is meant by the term *major normative life transition* and discusses whether the transition to parenthood could be classified as a *crisis*. This is followed by a brief discussion of a model presented by Cowan and Cowan (2003) on the domains of family life that experience change with the arrival of the first child. Each section thereafter focuses on one of these domains and presents related research findings.

### 2.2.1 Terminology

As Cowan and Cowan (2003) explain, the term *normative* does not indicate that only normal, well-adjusted families experience this event. It merely implies that having children is an expected and predictable life event experienced by most families because of physiological, psychological and social trends (Cowan & Cowan, 2003). *Transition* means that there is change or passage from one state to another (Robinson & Davidson, 2004), and thus involves a change in the arrangement of circumstances. It also implies that the period of change between these relatively stable states is considerably imbalanced (Cowan & Cowan, 2003). As mentioned in the first chapter of this thesis, there is a well-established moderate decline in functioning and many parents experience negative changes because of the stress placed on the system by these changes (for reviews see Cowan & Cowan, 1995, 2003; Karney &

Bradbury, 1995; Worthington & Buston, 1987). Some families enter into a state of crisis and experience problems, distress and dysfunction if they are rigidly organised and not flexible enough to restore equilibrium. However, the term transition also emphasises that there is the potential for adaptation, and thus parents may grow, cultivate their existing skills, acquire new coping mechanisms and progress to higher levels of functioning if they are able to utilise their resources flexibly and successfully. The emphasis therefore is not on the notion that it is a crisis period, but that there is a *risk* for maladaptive change to take effect. Lastly, the term *major* implies that this life event effects considerable disruption in multiple domains of family life, as opposed to only in one domain. Cowan and Cowan (2003) suggest a six-domain systems model of family processes. Each of these domains experiences shifts during major life transitions and can be seen in Figure 2.2.

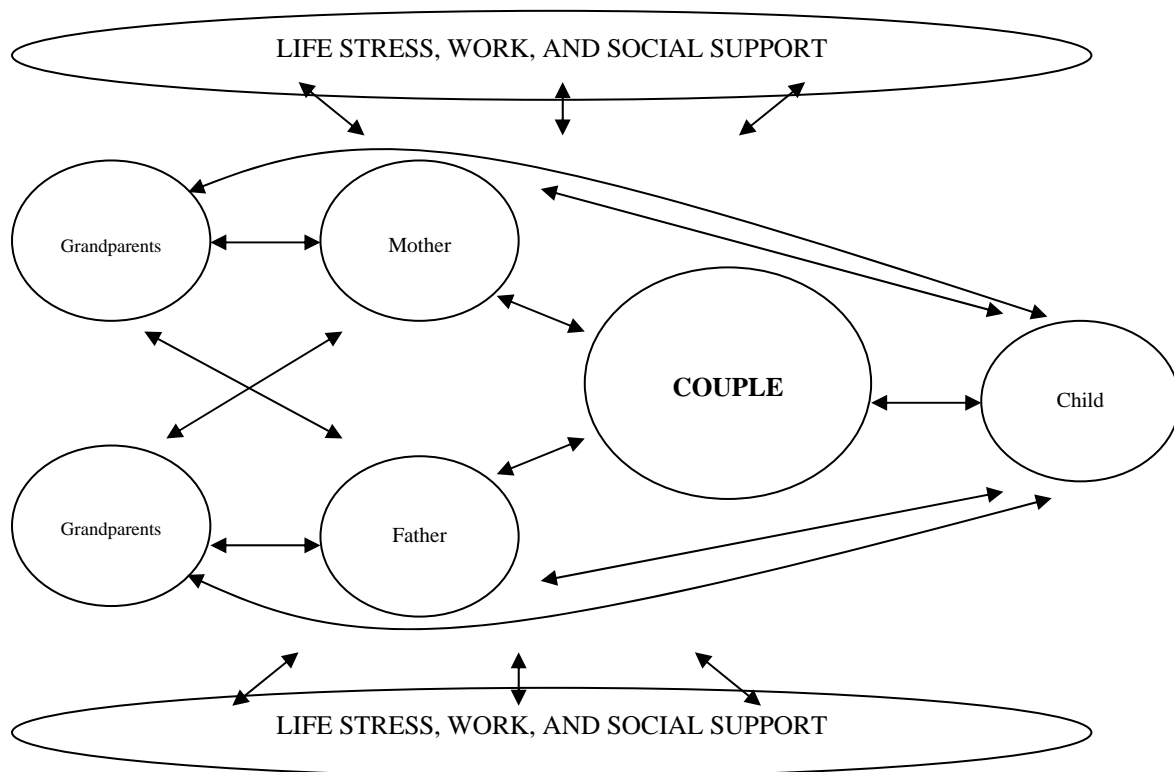


Figure 2.2. A schematic representation of the connections among five of the six family domains (Cowan & Cowan, 2003).

During the transition to parenthood, these shifting domains are (a) parents' individual functioning and sense of self; (b) the quality of the couple relationship; (c) relationships with family of origin; (d) the balance between life stress, work and social support; and (e) the relationships with the child (Cowan & Cowan, 2003). There is a sixth domain that usually undergoes change during a transition, namely the quality of the sibling relationship, but this last domain is omitted from the transition to parenthood because there initially (except in the case of twins) is no sibling relationship (Cowan & Cowan, 2003).

The transition to parenthood is significant, since the family system becomes a permanent structure for the first time (Goldenberg & Goldenberg, 2008). If the couple divorces prior to having children, the family unit merely dissipates. However, once they have children they remain parents even after divorce, and thus are linked to each other through their connection with the children (McGoldrick & Carter, 2003). The shift from dyad to triad means that parents, as well as extended family members, all move up a generation and there is an overall realignment of the vertical axis of McGoldrick and Carter's (2003) family life cycle model. Young adults now become the caretakers of a younger generation (Goldenberg & Goldenberg, 2008). Subsystems occur within the nuclear family. Thus, besides the marital dyad, there also exists a mother-child subsystem and a father-child subsystem. Furthermore, a grandparent-child subsystem must also be negotiated successfully.

The lines with an arrow at each end indicate that there is bi-directional interaction between the various domains (see Figure 2.2) and causality is circular (Cowan & Cowan, 2003). In other words, parents affect their children's development and children in turn affect parental growth; the marital relationship affects each partner's parenting and the parenting of individuals affects the marital relationship; the family's functioning affects what adults experience at work and work affects family functioning. Although the transition to

parenthood causes disruption in these domains, there is also remarkable consistency of well-being and dysfunction in these domains over time (Cowan & Cowan, 1995, 2003).

The arrival of the child is unlikely to destroy the satisfaction of well-functioning families and it is also unlikely to increase the satisfaction of already distressed couples (Cowan & Cowan, 1995). This is because the disequilibrium in the system, caused by the addition of the child, has a tendency to escalate problems and distress that already exists within the system. Thus it is possible to identify families who are at risk for marital distress or dysfunction, based on their functioning in these domains prior to the birth of their babies (Cowan & Cowan, 1995). These domains will now be examined in further detail. Finally, although Cowan and Cowan (2003) do not mention family routines in their model, the literature reveals that this aspect of family life also experiences major change. Because it is an integral part of this study, it has been added to the discussion.

### 2.2.2 Shifts in parents' individual functioning and sense of self

Moving up a generation requires a change in self-concept and identity to include the role of parent (Cowan & Cowan, 2003; McGoldrick & Carter, 2003). Thus, a cognitive and psychological shift must occur. If parents do not see themselves as caretakers and fail to achieve this shift, they may refuse to undertake childcare responsibilities, or may experience low self-efficacy when trying to accomplishing tasks (McGoldrick & Carter, 2003). If parents experience role incongruence and the construction of their identity does not validate their parental role, they may evaluate themselves and their relationships less positively, causing them to experience a decline in individual and marital well-being (Cast, 2004). On the other hand, making such a shift successfully may lead to: a greater sense of maturity; a new perspective on life; an increase in vitality, relational commitment and self-control (Cowan & Cowan, 2003); an increase in the ability to multitask and manage life; a greater appreciation

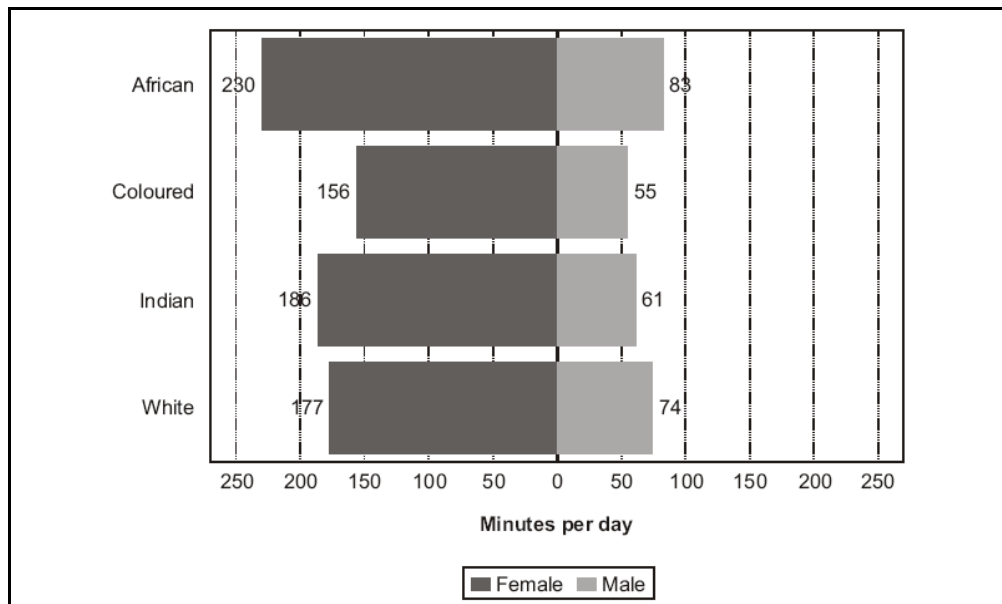
for individual differences of oneself and one's partner; and better preparation for the future (Alborg, cited in Walters, 2009).

However, the concept of change and transition may be overstated to some degree, since factors from previous stages often spill over into the next stage. Cowan et al. (cited in Cowan & Cowan, 2003) also conclude that people tend to remain constant over time and found that parents who displayed low self-esteem on prenatal measures also showed low self-esteem six to 18 months postpartum. Other prenatal factors may influence the parents' views of themselves as mother or father. For instance, Leon, Jacobvitz and Hazen (2004) found that mothers who experienced childhood loss or abuse and who still had unresolved issues related to that loss or abuse, displayed less sensitive caregiving towards their child than mothers who had resolved their traumatic experiences. Thus, having unresolved past experiences can influence a parent's current state of mind and affect the level of adjustment he/she achieves.

Also, whether parents plan to have children or not may play a role in whether their self-concepts accept this new identity. It is possible that, when couples first decide to have children, they already display a shift in cognition because they already can envisage themselves as parents. It may indicate that they are psychologically prepared and thus that their cognitive modifications started to take affect long before pregnancy. Furthermore, women who in prenatal interviews displayed more complex expectations of what it would be like as a parent, displayed better postpartum adjustment than those who had simplistic expectations (Pancer, Pratt, Hunsberger & Gallant, 2000). Thus, having a realistic and multifaceted view of what it means to be a parent, and what this identity will necessitate, can also affect how well one adjusts to this new role.

Another factor is the timing of parenthood. It has been argued that fathers who are involved in childrearing but who had their children later in life (after the age of 30), may not experience the same degree of negative feelings as “on-time” fathers (Cooney, Pedersen, Indelicato & Palkovitz, 1993). This is because delayed child bearers may have greater resources and may display more maturity as opposed to younger parents (Cooney et al., 1993). Cowan and Cowan (cited in Cowan & Cowan, 2003) found similar results in that, during the transition from pre-birth to post-birth, self-esteem seemed to remain constant in older parents (ages 31 to 40) as opposed to younger ones (ages 21 to 30), who experienced significant decline.

Furthermore, cultural ideologies affect what is deemed appropriate parental behaviour for the different genders. Gender role constructions vary on a continuum ranging from egalitarian to a more traditional male breadwinner-female homemaker model. Within this traditional view, motherhood is seen as a central part of female identity as opposed to male identity. Simon (1992) corroborates this, saying that parenthood is a more salient self-concept for women than it is for men. Fathers are often still seen as the helpers rather than the primary caretakers of children (Katz-Wise, Priess & Hyde, 2010). Overall, mothers see their parental role as nurturers and caretakers, whereas fathers take on the additional role of provider and often place greater emphasis on this part of their parental identity (Katz-Wise et al., 2010). Thus, a wife’s new self-concept may differ from her husband’s self-concept because they assimilate different gender constructions into their identities. In South Africa, families tend to divide daily tasks according to more traditional stereotypes. Figure 2.3 shows that, across all population groups, employed South African women between the ages of 15 and 65 spend far more time each day caring for other household members and performing various household duties than do men (Statistics South Africa, 2002).



*Figure 2.3.* Mean minutes per day spent on unpaid housework, care of others and collecting of fuel and water among employed women and men in each population group (Statistics South Africa, 2002).

Thus, when both husband and wife are employed, women still spend more than double the amount of time on household duties. Even if couples have more egalitarian relationships prior to the birth of their first child, the vast majority of families tend to fall back on traditional gender divides after the arrival of their firstborn (Cowan & Cowan, 2003; Fraenkel, 2003; Goldenberg & Goldenberg, 2008; Katz-Wise et al., 2010; Kluwer, Heesink & Van De Vliert, 2002; Koivunen, Rothaupt & Wolfgram, 2009).

Statistics South Africa (2001) show that, in households where South African women have live-in children, women spend 87 minutes per day on childcare as opposed to men in this position, who spend an average of only seven minutes a day. Because mothers wish to breast-feed and because of powerful cultural scripts concerning men and women's proper roles, many new mothers prefer to stay at home with the infant (Fraenkel, 2003). However, this change is not only affected by the parents' self-concepts and patriarchal ideologies, but is

also affected by economic disparities. Even if the couple has equitable parental identities, workplace policies support maternal leave but ignore the rights of fathers to take extended leave for childcare purposes (Dancaster, cited in Mokomane, 2009). Furthermore, men still tend to earn more than women. On average, South African women earn less per hour than South African men across all population groups (Statistics South Africa, 2002). Women are more likely to be found in lower earning categories (R200 and less per month or R201 to R500 per month), and men are more likely to be found in higher earning categories (more than R4 500 per month) (Statistics South Africa, 2002). In addition, more men than women tend to get employment benefits like family medical aid cover (Statistics South Africa, 2002). Thus, financially it makes more sense if the mother stays home to take care of the children. In other words, even when men and women want to be more equal in dividing family responsibilities, factors outside the home make it difficult. It must be stressed, however, that a traditional gender distribution of tasks is not necessarily experienced as a negative change by the couple. The change to more traditional domestic roles may be welcomed by partners whose sex role attitudes are congruent with these changes (Fraenkel 2003; MacDermid, Huston & McHale, 1990). In contrast, when there is incongruence, the couple could experience strain in their marital relationship.

Although the shift in cognition and self-concept is an important feature of the adaptation process, a recent study by Gordon, Zagoory-Sharon, Leckman and Fieldman (2010) suggest that physiological differences may also play a major role in whether parents adjust to their new roles as parents. They found that mothers who had higher levels of nonapeptide oxytocin (OT) displayed more affectionate parenting behaviours, “motherese” vocalisations (high-pitched, sing-song dialogue), expression of positive affect, and affectionate touch (Gordon et al., 2010). Higher levels of OT in fathers were also associated with more stimulatory parenting behaviours, namely proprioceptive touch (changing infant position in space), tactile



stimulation, and object presentation (Gordon et al., 2010). Thus, the effect of physiology can never be ignored when analysing family dynamics. However, this was the first study examining the relationship between oxytocin and parenting in humans (Gordon et al., 2010). More studies need to be conducted to establish causality, and further investigation should try to eliminate all extraneous variables that could affect this correlation.

### 2.2.3 Shifts in the couple relationship

Research consistently reports that, across the transition to parenthood, there is a moderate change in central tendencies concerning the marital relationship (Glade, Bean & Vira, 2005). Many couples experience a moderate decline in marital functioning, adjustment and satisfaction (Belsky, Lang & Rovine, 1985; Belsky & Rovine, 1990; Belsky, Spanier & Rovine, 1983; Cowan & Cowan, 1995, 2003). For instance, in a longitudinal study, Belsky and Rovine found that, between late pregnancy and three years postpartum, 30% to 59% of parents experienced a decline in marital quality. Only 10% to 30% showed a modest positive improvement (Belsky & Rovine, 1990). However, they add that these changes are influenced by multiple factors, factors that could mostly be identified prior to the birth (Belsky & Rovine, 1990).

Prior to the birth of the child, the couple has been focusing on meeting each other's needs for support and intimacy (Bischoff, 2004). However, the system changes rapidly into one where parents are fixated on the requirements of the child (Bischoff, 2004). The newborn now necessitates most of the nurturing and attention within the family, and the adults have less energy and time to invest in marital intimacy. Because of fatigue and anxiety, juggling household duties with work and childcare responsibilities, and dealing with the new infant's demanding feeding and sleeping patterns, the couple relationship takes a back seat. Partners have less time to spend on joint leisure activities and their perception of the relationship as a

romance decreases (Belsky et al., 1983). Because of fatigue and time constraints they also have less time for sexual intimacy (Twenge, Campbell & Foster, 2003). Overall, making the shift in one's identity to include the role of parent seems to come at the expense of one's identity as partner or lover (Cowan & Cowan, 2003; Twenge et al., 2003). Furthermore, because task allocation within the system suddenly falls back on traditional and stereotypical gender divides, there are higher levels of stress and conflict as couples try to negotiate an arrangement with which they are both comfortable (Cowan & Cowan, 2003; Goldenberg & Goldenberg, 2008; Worthington & Buston, 1987).

However, it must be stressed that, even though there is a moderate decline in the majority of relationships, this does not mean the couple's satisfaction changes from absolute marital bliss to total chaos, despair and divorce (Belsky et al., 1983, 1985; Belsky & Rovine, 1990; Cowan & Cowan, 2003). Parents who experience high levels of marital dissatisfaction and dysfunction after the birth, usually displayed dissatisfaction and dysfunction prior to the transition (Belsky et al., 1983, 1985; Belsky & Rovine, 1990; Cowan & Cowan, 1995). Certain risk factors may bolster the negative impact of the systemic disruption, intensifying it. On the other hand, protective factors could reduce systemic disruption and aid adaptation. Bischoff (2004) reports that couples who tend to adjust and adapt well are those who have an established foundation of relational quality and who are mutually supportive. These are also couples who have navigated the division of household tasks and gender roles well, and who have other resources at their disposal, such as childcare (Bischoff, 2004). A recent South African study on Afrikaans- and English-speaking fathers found that, where fathers perceived the egalitarian family to be the ideal family, they took more responsibility for domestic tasks, demonstrated more parental involvement in the caretaking of their children, performed more tasks to increase emotional support within the marital relationship, and were more likely to experience marital integration (Smit, 2006).

Other factors also have an impact on adjustment. Curran, Hazen, Jacobvitz and Fieldman (2005) assessed adults' memories of family of origin relationships and their own marital maintenance behaviours (behaviours the person engages in to maintain intimacy and satisfaction in their relationship) across the transition to parenthood. Adults who have unfavourable memories of their parents' marriage and who are preoccupied with their early relationships with their parents seem to display a sharp decline in their own marital maintenance behaviours postpartum (Curran et al., 2005). This was in contrast with parents who had positive representations of family of origin relationships, and who displayed little decline (Curran et al., 2005). Perren, Von Wyl, Bürgin, Simoni and Von Klitzing (2005) also found an intergenerational transmission of marital quality that seemed to be escalated by the stress and imbalance caused by this developmental stage. On the other hand, further research shows that, when adults in prenatal interviews have insight into the disharmonious aspects of their parents' marriage, it tended to help the couple dyad to be more emotionally connected and responsive than those who had little insight (Curran, Hazen, Jacobvitz & Sasaki, 2006). Thus, it is hypothesised that if adults are perceptive about their parent's marital difficulties, it may help them anticipate marital problems during their own transition to parenthood, which increases their attention to maintaining their relationship (Curran et al., 2006).

Leisure activities may also be a factor to consider. Although leisure activities initially decline after the birth of the child, it is the existence of prenatal leisure activities that affects adjustment. Claxton and Perry-Jenkins (2008) found that when wives reported more leisure activities that they share with their husbands during the prenatal months, they reported more marital love and less conflict one year after the transition. In contrast, husbands who reported more independent leisure activities during the prenatal months reported less love and more conflict one year later (Claxton & Perry-Jenkins, 2008).

Violated expectations are another risk factor that could increase marital disruption. When a parent expects a certain amount of support from his/her partner during the pre-baby months, and this support does not materialise after the child's arrival, the parent is more likely to display depressive symptoms (Cowan & Cowan, 2003).

Another risk factor is when wife and husband do not collaboratively plan to have children. Couples who, during pregnancy, are divided on whether they feel ready to have a child are at risk for marital decline, or even divorce (Cowan & Cowan, 2003). In contrast, those who mutually plan the timing of their pregnancy stay relatively unaffected (Cowan & Cowan, 2003).

Lastly, Cowan and Cowan (2003) place emphasis on the idea that it is not the existence of any specific aspect, per se, that predicts marital quality, but rather the discrepancy between the husband and the wife's experiences. The couple will very likely undergo strain if they differ considerably in terms of how they experience the following aspects: satisfaction with division of housework, parenting ideology, relationships with family of origin, life stress such as work, and connections to social support networks. As the gap between the husband and wife's experiences increase, so do their dissatisfaction with the marital relationship (Cowan & Cowan, 2003).

#### 2.2.4 Relationships with family of origin

McGoldrick and Carter (2003) suggest that because of the change in family structure and because adults all move up a generation, grandparents must now learn to take a back seat and allow their children to resolve their own childcare challenges and to determine their own parenting styles. Memories of family of origin experiences during childhood are usually important resources used by new parents when deciding what parenting strategies to use. In a

qualitative study conducted by Kolar (1999), parents generally valued the parenting styles of their family of origin, although these were not applied without reservation. Even though there were aspects of the styles they wanted to emulate, most mothers and fathers made modifications to the model their parents used (Kolar, 1999). Only 13% of the respondents consciously tried to recreate and implement their parents' style and principles. These respondents had very fond memories of their youth, had close relationships with their parents and had enjoyed their childhood years. In contrast, 7% of the respondents completely rejected the parenting model used by their family of origin and took on very different styles from their parents. These respondents had unsatisfactory childhood experiences and strained relationships with their family of origin (Kolar, 1999).

Whether parents emulate or change their family of origin's parenting model, it is the prerogative of the couple to decide how they will raise their child. Grandparents must form a different caring connection with their children and grandchildren, instead of being the primary parental authorities (McGoldrick & Carter, 2003). Thus, the shift in the intergenerational system causes a renegotiation of boundaries between the young nuclear family and their families of origin. These boundaries can be difficult to manage. New parents have to decide when and how often they will make contact with their extended family; how much advice on childcare they will permit from their parents; how to respond to their parents' criticisms when their caring practices differ; and how to handle pressure about decisions relating to maternal work (Cowan & Cowan, 2003).

Even though new boundaries must be negotiated, research reports that connections with families of origin usually increase during this phase of life. Knoester and Eggebeen (2006) found that, besides increasing their hours at work, the transition often reorganised men's lives in that it encouraged them to increase intergenerational and extended family interactions at

the expense of spending time socialising with friends. Cowan and Cowan (cited in Cowan & Cowan, 2003) also found an increase in the frequency of contact between the young couple and their parents. This is to be expected, as new parents often need advice and assistance from seasoned caretakers. However, an increase in contact is not always experienced as a positive change, especially if the relationship was strained prior to the arrival of the child (Cowan & Cowan, 2003). In contrast, if men and women have positive relationships with their parents prior to childbirth, they are more likely to report positive adjustment after the transition to parenthood (Florsheim et al., 2003) and better parenting with their own infant (Cox et al., 1985). Thus, intergenerational influences may buffer or bolster a disruption to the system, depending on the quality of intergenerational relationships.

#### 2.2.5 Shifts in life stress, work, and social support

This section concerns the stressors and protective factors outside the nuclear and extended family. A key issue for families is the work-family interface (Fraenkel, 2003). The boundary between work and family is recursive or bidirectional (Fraenkel, 2003). For instance, a husband's demanding and stressful job may decrease his ability to share in household tasks, or to be as emotionally available to his wife. She, in turn, feels overburdened and unsupported and resents that she has to carry his housework load on top of her own, creating marital conflict. Both parents may then bring their family stress back to the workplace, decreasing their effectiveness. This contributes to their sense of being overwhelmed by work demands and decreases their job satisfaction (Fraenkel, 2003). In other words, work stress or support filters through and influences family life, and family distress or harmony affects parental work adaptation.

A central issue for new mothers is the timing of their return to work (Cowan & Cowan, 2003). Many mothers may feel conflicted by their need to assist the family financially by

returning to work and their desire to take care of the new infant (Cowan & Cowan, 2003). Studies that have examined this work-family link during the transition to parenthood found several factors that could assist mothers' re-adaptation to work after maternal leave: satisfactory childcare arrangements, part-time employment, higher marital support, and lower levels of depression (Feldman, Sussman & Zigler, 2004); as well as the infant's temperament, and lower separation anxiety (Feldman, Masalha & Nadam, 2001). On the other hand, shorter parental leave and the perception of inadequate childcare arrangements negatively affected parents' re-adaptation to work (Feldman et al., 2004). Employment-related risk factors that could negatively impact on family life are working night shifts and increases in role overload. These factors have been related to more depressive symptoms in parents across the transition to parenthood, and predict higher relationship conflict (Perry-Jenkins, Goldberg, Pierce & Sayer, 2007). Compared to couples who work the same shift, couples working different shifts have increased risk for marital distress, negative interactions and child-related problems (White & Keith, cited in Fraenkel, 2003).

In terms of labour legislation, one finds an increasing number of advocates for family-friendly policies regarding time regulations and statutory parental leave, because these can be used to facilitate a better work-family balance (Dancaster, cited in Mokomane, 2009; Oomens, Geurts & Scheepers, 2007; Pavalko & Henderson, 2006; Sorj, 2004). One of these family-friendly policies includes flexitime, allowing parents more choice in work schedules. Temporal dyssynchronies in parents' work schedules (even if the difference is as little as one or two hours) may cause family stress (Jacobs & Gerson, cited in Fraenkel, 2003). The complexity of combining parents' schedules of leaving and returning to work, together with transportation challenges and children's sleep, wake, eating and school schedules, can contribute to less family time and less sharing of household responsibilities. Thus, allowing parents more choice in work schedules may ease the burden of arranging family routines.

South African labour legislation does not support family-friendly arrangements. There is no separate legislation giving employees the right to request flexible working hours (Dancaster, cited in Mokomane, 2009). The only legal avenue South African employees could take is through the unfair discrimination provision of the Employment Equity Act, but this is a costly and arduous exercise and is not utilised (Dancaster, cited in Mokomane, 2009). It is unclear how many South African companies offer flexitime as an option, despite the labour legislation, and how many employees actually make use of such provisions.

Other family friendly policies that can facilitate the equilibrium between work and family life include statutory and non-statutory leave, such as maternity, paternity, parental and temporary leave periods so that employees may take care of children (Oomens et al., 2007; Pavalko & Henderson, 2006). In an American study, shorter maternity leave (less than 12 weeks) was associated with higher maternal depression, lower involvement with the infant, less awareness of infant development, lower self-esteem, and a more negative impact of the birth on the marital relationship (Feldman et al., 2004). Even though the average length of leave period for fathers in this study was much shorter than that of mothers, longer paternal leave was associated with more paternal involvement with the infant, more maternal support and higher family salience (Feldman et al., 2004). As stated earlier, South African public policies tend to support the male breadwinner archetype, and thus the Basic Conditions of Employment Act only recognises maternity leave (Dancaster, cited in Mokomane, 2009). The only provisions made for fathers fall under the family responsibility leave policy, which is a leave provision that combines paternity and emergency leave care (Dancaster, cited in Mokomane, 2009). However, the policy allows for only three days' paid leave a year; is only available to employees working four days a week; and is only available to employees who have worked for their employer for at least four months (Dancaster, cited in Mokomane, 2009). Despite inequitable labour legislation, some South African companies do have more



egalitarian guidelines and offer their male employees the opportunity to take more time off for childcare purposes. Smit (2006) found that Afrikaans- and English-speaking South African men who have the opportunity to take paternity leave and who make use of this benefit are more involved in domestic tasks, care-taking and childrearing responsibilities, and in emotional support tasks within the marital relationship.

A third family friendly policy that affects fathers' involvement is working from home and telecommuting. Smit's study (2006) showed that longer working hours at the office had a significant negative correlation with paternal involvement and childrearing practices. On the other hand, more hours spent per day on occupation-related work at home increased paternal involvement and emotional support tasks within the marital relationship (Smit, 2006). However, Fraenkel (2003) warns that telecommuting may weaken the work-family boundary to such an extent that work invades family activities, making it even harder for parents to balance work and family time because they cannot adequately separate their work and family responsibilities.

Besides work-related factors, another key protective factor for new parents is their social support network. Bost, Cox, Burchinal and Payne (2002) found that parents' social networks were relatively stable and consistent from the prenatal period to two years postpartum. However, negative changes in social networks were linked to struggles with adjustment and an increase in depression (Bost et al., 2002).

To conclude, as the family life cycle framework indicates, when a family is already experiencing pressure from the wider systemic environment (such as work overload), the disruption in family processes caused by the life cycle stage may be intensified. On the other

hand, the wider systemic environment can also provide resources (such as social support) that protect against disruption.

#### 2.2.6 Relationships with the child

As with all the other family domains, the relationship with the child is bidirectional in nature. Thus, the child influences parents and grandparents, and these family members affect the behaviour of the child. For instance, the prenatal psychological adaptation and marital quality of fathers and mothers predict their parenting effectiveness during the first two years after the child's birth (Belsky & Rovine, 1990; Cowan & Cowan, 1995), as well as parent-child relationships four and six years later (Cowan, Cowan, Schultz & Heming, cited in Cowan & Cowan, 1995). Parental maladjustment has a spill-over effect, influencing child development, and it also affects how well a child acclimatises on a social and academic level when going to elementary school (Cowan & Cowan, 2003). However, the infant's temperament and genetic predisposition can greatly influence a parent's feelings of competence (Cowan & Cowan, 2003; McGoldrick & Carter, 2003; Towers, Spotts & Reiss, 2003). It is important to note that environmental factors usually interact with genetic features, and the compounded effect (Towers et al., 2003) may elicit characteristics within the child that make him/her particularly difficult to parent. When a mother and father struggle with a challenging infant, it could hamper their self-concept as parents and increase their levels of stress.

#### 2.2.7 Family routines

When two people get married, the family system is loosely organised (Goldenberg & Goldenberg, 2008; Olson & Gorall, 2003). Spouses' roles are more interchangeable and flexible (Olson & Gorall, 2003). Without young children, the family structure allows for a wide variety of solutions and adjustments when confronted by immediate obstacles (Goldenberg & Goldenberg, 2008). Thus, when it comes to a dinner routine, the couple may

choose to eat dinner at a later time, go out to a restaurant, stay late at a dinner party, prepare dinner together and eat at leisure at home, or not have dinner at all. The couple could be more spontaneous, changing their arrangements at the last minute without having to take into account the needs of a small child. However, with a new baby in the house, all schedules (including eating schedules) become much more formal, structured and specific. Events like dinnertime usually need to be planned for and arranged ahead of time, and the arrangements that are made always fall in unison with the child's circadian rhythms, such as hunger and sleep/wake patterns. The family's entire schedule and routines become organised around the child (Goldenberg & Goldenberg, 2008). Because there is a shift in role allocation and the couple has to balance multiple tasks, the household duties and childcare arrangements also become more structured and must be planned in advance (Goldenberg & Goldenberg, 2008). Questions of who, what, where and when become major discussion points (Goldenberg & Goldenberg, 2008). Parents have to decide in advance: who will pick up the child at the nursery, when will someone shop for needed groceries, where will they fit in doing the laundry, what must each parent do in the morning to get the child ready for day care? Parents need to make various changes to their already existing schedule and restructure various family routines in order to adapt successfully to the arrival of the child (Weisner et al., 2004).

As is evident from the discussion of the previous domains, it is possible that intra-familial factors such as the parents' self-concepts, gender ideologies, child readiness, marital quality, child temperament and child rearing strategies may affect the family's set of routines. Furthermore, extra-familial factors may also impede or assist the formation of functional and satisfactory family routines (Gallimore et al., 1993; Weisner, 2002a, 2002b; Weisner et al., 2004). Thus, variables such as the flexibility of parents' work hours, the availability of adequate childcare, and the frequency of contact with extended family and friends are all

possible external factors that could affect whether the family can find a satisfactory solution for their daily routines.

In conclusion, it is clear from the discussion of these multiple family domains that family life undergoes change during the transition to parenthood. However, the research indicates that some families experience the addition of a child as a distressing event, while other families cope well with the change. The families that cope well have certain strengths and protective resources that they utilise, and these assist their adjustment and adaptation to this normative life transition. This ability to resist disruption and regain stability in the face of challenges relates to the concept of family resilience, which is the central theme of the next discussion.

### 2.3 A Family Resilience Framework

The first part of this section will touch on the theoretical origins of the resilience perspective. Secondly, it will be elucidated what is meant by the construct *family resilience*, placing it within a systemic framework and taking into account both ecological and developmental orientations. Subsequently, the discussion turns to the potential benefits of using this paradigm and why it is important to focus on family strengths rather than deficits. This is followed by a history of the development of various resilience models and then an elaboration of the *Resiliency Model of Family Stress, Adjustment and Adaptation*, proposed by McCubbin and McCubbin (1996). Lastly, the discussion turns to how family routines function as a resilience resource during the adjustment and adaptation processes.

#### 2.3.1 History of resilience perspective

During the 1980s, researchers recognised that the presence of risk factors did not invariably lead to pathology or dysfunction (Walsh, 2002, 2003). Prior to this realisation, the popular psychological viewpoint was that traumatic childhood experiences and unhealthy family

environments were unavoidably damaging to the individual (Walsh, 2003). However, evidence left researchers disillusioned with this deterministic view, because although the exposure to adverse situations did produce problems for some, many overcame similar obstacles and led happy, productive lives (Rutter, cited in Walsh, 2003). To account for this discrepancy, researchers tried to discover variables that could assist recovery. In keeping with the historical trend within psychology, resilience research initially focussed on the individual rather than the family and tried to identify personal traits that helped individuals overcome their unfavourable situations (Hawley, 2000; Kalil, 2003; Patterson, 2002). Resilience was seen as an innate attribute or personal characteristic, allowing the child to be psychologically impenetrable by environmental stress and familial distress (Wyman et al., cited in Kalil, 2003). As the view of resilience evolved, researchers recognised interactional processes between the individual and the environment (Walsh, 2003). However, most tended to ignore the family's protective influence and held a pessimistic and limited view of its effect on individual development (Walsh, 2003). Studies focussed on extra-familial resources that helped children's hardiness, such as mentors and teachers who believed in the potential of these children (Walsh, 2002, 2003). The family's role was seen mostly as illness-creating rather than resilience-promoting (Walsh, 2003). As resilience studies increased, covering an array of different stressful conditions, there was a realisation that resilience is a process that unfolds over time and encompasses the interplay of individual, familial and larger societal risk and protective factors (Walsh, 2002, 2003). Thus, resilience research today tries to establish which kind of protective factors exist on various systemic levels, how these protective factors affect the impact of different stressors, and how their positive effect might outweigh vulnerability (Walsh, 2003).

### 2.3.2 Definition of the family resilience construct and theoretical framework

If one considers the family life cycle perspective, all families will face upheavals at some point as they travel through time. The horizontal axis in Figure 2.1 represent both expected strains (such as the arrival of a firstborn) and unexpected strains (such as the death of a family member, or sudden unemployment). However, not all families will react to these potentially distressing and disruptive incidents in the same way (Goldenberg & Goldenberg, 2008). Some families experience prolonged distress and never recover; others endure mild distress and for a shorter period of time (Goldenberg & Goldenberg, 2008). Families that recover quickly, maintain their psychological and physical functioning, and even thrive after extremely difficult experiences, are families that display resilience. These families can flexibly utilise their strengths and resources so that they “struggle well” with the disruption, respond successfully to the challenges they face, and grow from their adversity (Walsh, 2003, p. 399). Thus, resilience is a dynamic process that fosters the ability to withstand disruptive life experiences and adapt to challenges (Kalil, 2003; Luthar, Cicchetti & Becker, 2000; McCubbin & McCubbin, 1996; Walsh, 2003). Important to note is the presence of hardship. Researchers all agree that resilience only occurs when a family is exposed to adverse conditions (e.g. Kalil, 2003; Luthar et al., 2000; McCubbin & McCubbin, 1996; Walsh, 2003). Thus, it is not the successful evasion of risk that makes a family resilient, but the successful engagement with risk (Rutter, cited in Kalil, 2003). McCubbin and McCubbin (1996) define family resilience as:

The positive behavioural patterns and functional competence individuals and the family unit demonstrate under stressful or adverse circumstances, which determine the family's ability to recover by maintaining its integrity as a unit while insuring, and where necessary restoring, the well-being of family members and the family unit as a whole. (p. 5)

McCubbin, McCubbin, Thompson, Han and Allen (cited in Kalil, 2003) expanded the notion of resilience to include two key processes. The first is termed *elasticity*, which refers to the ability of the family to maintain some of their established patterns of interaction and functioning, thus resisting change when exposed to stressors (McCubbin et al., cited in Kalil). The second is termed *buoyancy*, which means that the family also has the ability to recover quickly from trauma by altering the organisation of family life (McCubbin et al., cited in Kalil). Walsh (2003) aptly adds that it is not so much a process of ‘bouncing back’ than it is a process of bouncing forward, because family members can never return to a state that is identical to their pre-crisis life. The disruption changes them and “involves the potential for personal and relational transformation and growth that can be forged out of adversity” (Walsh, p. 401). Thus, a resilient family matures and evolves to regain functioning and well-being and may even surpass their previous level of functioning. In essence, the concept of family resilience can be summed up as follows:

- (1) It is an unfolding *process* rather than a quality or single, instantaneous event.
- (2) It encompasses *positive characteristics and strengths* of the family as a whole and of the individual family members.
- (3) It surfaces when the family faces a *crisis or hardship*.
- (4) It helps the family maintain some level of unity and continuity during the crisis, thus *resisting change*.
- (5) It also *assists change and adaptation* in needed areas so that the family develops new functional strategies in meeting their challenges.
- (6) It ensures that the family *regains stability and well-being*.
- (7) And it ensures that the family as a whole, and individual family members, *mature and grow* through their hardship.

The resilience perspective draws on theories from an ecological as well as a developmental framework (Walsh, 2003). Thus, it views the family as a system situated within a unique and complex cultural, social and ecological context. This system also changes and develops as it moves through time (Walsh, 2003).

Firstly, in terms of ecological theories, the bio-psychosocial systems orientation stresses that the individual, the family and the wider ecological and cultural system all influence each other recursively, either creating a state of vulnerability and risk, or promoting resilience (Walsh, 2003). Problems within the family may be produced by individual predispositions and vulnerability (such as illness), and then be escalated further by unsupportive surroundings (such as inadequate health care, societal stigma and poverty) (Walsh, 2003). A family may also experience nurturance from the wider systemic network (such as supportive community ties, satisfactory work environments, and caring friends and extended family). These bolster the family's functioning and buffer against disruption and disharmony. Each family system has typical and atypical features, thus displaying similarities with other family networks in the wider ecocultural system, but also encompassing unique qualities of its own (Walsh, 2003). Each crisis is viewed in holistic terms, not only assessing how the family situation conforms to typical family conditions, but also the unique values, resources and coping strategies of a particular family (Walsh, 2003).

Secondly, because the developmental perspective stresses that these multidimensional and nested systemic layers move through time, it is important to note that being faced with a stressor and recovering from it is not a short-term occurrence (Walsh, 2003). No single coping strategy will be sufficient in dealing with a crisis, but rather requires multiple approaches applied flexibly and at different times (Walsh, 2003). Strategies that are efficient and effective in the short run may become dysfunctional as time unfolds (Walsh, 2003).



Furthermore, the past can influence the present through a pile-up of multi-systemic stressors, consequently overwhelming the system (Walsh, 2003). Past traumatic events have a cumulative effect because they exhaust resources and alter the family's appraisals (Walsh, 2003). Current hardships may bring up painful memories and legacies from past experiences or unresolved losses (Walsh, 2003). These affect how the immediate situation is assessed, perhaps exaggerating the stressor's severity. On the other hand, positive events and victories in the past can reduce vulnerability and mediate the effect of the current stressor. Lastly, because resilience is viewed within the context of a multigenerational family system as it progresses along the life cycle, the resilience framework assesses family adjustment and adaptation around predictable, normative events (such as the transition to parenthood), as well as unexpected life stressors (such as unexpected unemployment) (Walsh, 2003).

### 2.3.3 Benefits of using the resilience perspective

What makes the resilience perspective so appealing is that it overcomes theoretical and philosophical obstacles in classifying family normality and health (Walsh, 2003). Normality has traditionally been defined as (a) asymptomatic, (b) typical, or (c) ideal (Walsh, 2003). All three of these descriptions are problematic. Firstly, a normal family does not always imply that a family is asymptomatic. All families have problems at some stage during the life cycle (McGoldrick & Carter, 2003). Therefore the presence of distress does not indicate abnormality (Walsh, 2003). This deficit-based model also uses a negative criterion, skewing one's view of health by ignoring the presence of positive attributes (Walsh, 2003). Secondly, the term normality does not only include families who are average or typical. Families who are atypical, and who deviate from central tendencies on a normal distribution, may not be abnormal (Walsh, 2003). This definition has a tendency to pathologise difference (Walsh, 2003). On the other hand, some common societal patterns in families are not always normal, especially if these practices are destructive and abusive (Walsh, 2003). For instance, if the

presence of family violence is a common feature in a community, one can hardly say that families in this community who display violent behaviour are normal. Lastly, defining normality as being ideal is dangerous, because what we often consider as ideal is influenced by our cultural norms, subjective world views and ideological constructions (Walsh, 2003). These definitions often reflect the ideologies of the dominant group in a society and are utilised to exploit individuals and families who do not meet these standards (Foucault, cited in Walsh, 2003). For instance, the ideal of the intact, nuclear, father breadwinner-mother homemaker model has pathologised and stigmatised other family forms (e.g. divorced families, single parent families, and same-sex couples) for decades (Walsh, 2003).

A family resilience framework overcomes these theoretical barriers by emphasising that family normality is a systemic process that varies over time because of fluctuations in intra-familial and extra-familial demands (Cicchetti & Toth, cited in Kalil, 2003; Walsh, 2003). It assesses functioning in context and takes the family's values, resources and challenges into consideration (Walsh, 2003). It allows for varied family forms and considers the existence of unique coping styles (DeHaan & Hawley, 1996; McCubbin & McCubbin, 1996). It takes into consideration that there are multiple pathways for healthy adjustment and adaptation during times of hardship, as long as the process supports the maintenance of the family unit, the connectedness between its members, and the growth and well-being of each individual (Walsh, 2003).

#### 2.3.4 Development of models of resilience

Over a number of decades, many researchers have contributed to the establishment of a theoretical model that could explain the processes involved when a family is met with a disruptive stressor. Within the field of family stress research, the model has evolved by empirically testing and consequently improving the original ABCX Model proposed by Hill

in 1949 (McCubbin & McCubbin, 1996). Hill's ABCX Model was based on studies of family adjustment during the Second World War (McCubbin & McCubbin, 1996). His pre-crisis formula proposes that an event/stressor (A) interacts with the family's resources (B), as well as with the appraisal the family gives to the event (C), to produce the extent of the crisis situation (X factor). Years later, McCubbin and Patterson (cited in McCubbin & McCubbin, 1996) studied families during the Vietnamese War using Hill's original ABCX Model as a guide. Their research identified additional factors that affect family adaptation, such as family coping strategies and attempts to gain and utilise social support (McCubbin & McCubbin, 1996). By adding these additional factors they established the new Double ABCX Model of Adjustment and Adaptation, which reflects two stages of resilience (McCubbin & McCubbin, 1996). Following this, the model took on a process orientation, recognising that adjustment and adaptation are complex processes unfolding over time (McCubbin & Paterson, cited in McCubbin & McCubbin, 1996). This modification was termed the Family Adjustment and Adaptation Response (FAAR) Model, which asserts that the adjustment phase usually encompasses a process of resisting change, whereas the adaptation phase typically involves a process of family restructuring and consolidation (McCubbin & Patterson, cited in McCubbin & McCubbin, 1996). In 1988, after continuing research and theory development, McCubbin and McCubbin (cited in McCubbin & McCubbin, 1996) established the Typology Model of Family Adjustment and Adaptation. This extension zoomed in on the family's established patterns of functioning and appraisal processes (McCubbin & McCubbin, 1996). Even though this last extension started to touch on aspects of culture, ethnicity and social class, in general these models tended to be Eurocentric and favoured the assessment of the traditional two-parent family (McCubbin & McCubbin, 1996).

The *Resiliency Model of Family Stress, Adjustment and Adaptation* (hereafter referred to as the Resiliency Model) is the most recent model of family processes during stressful

conditions (McCubbin & McCubbin, 1996). This version aims to address the issues mentioned above. It recognises the family as a social system, situated within a particular context, emphasising social, cultural and ecological influences (McCubbin & McCubbin, 1996). It introduces the importance of harmony and balance because of the systemic nature of family life. Furthermore, the model expands on the family appraisal component involved in the recovery process, including culture and ethnicity (McCubbin & McCubbin, 1996). Lastly, it emphasises the family's relational processes during adjustment and adaptation, not only on an individual level, but also on a community level (McCubbin & McCubbin, 1996). Based on research, the model draws on five fundamental principles (McCubbin & McCubbin, 1996). The first is that change and ensuing hardship within the family is expected and normative as the family moves through time (McCubbin & McCubbin, 1996). Secondly, all families have a number of strengths, competencies and well-designed patterns of functioning. These assets advance the growth, maturation and well-being of the family as a whole and of each of the individual members. They also protect the family during expected life transitions (McCubbin & McCubbin, 1996). Thirdly, these assets preserve the family during times of unexpected, non-normative hardships and assist them in overcoming these disruptions (McCubbin & McCubbin, 1996). Fourthly, families obtain support from their surrounding social and community networks, but also contribute to these networks, especially during times of stress, distress and crises (McCubbin & McCubbin, 1996). Lastly, when faced with a crisis that necessitates major alterations in functioning, the family will work to regain adequate balance, harmony and order in the midst of change (McCubbin & McCubbin, 1996).

### 2.3.5 The Resiliency Model of Family Stress, Adjustment and Adaptation

According to McCubbin and McCubbin (1996), when a family experiences a stressor, two related but distinguishable phases, namely *adjustment* and *adaptation*, come into play. Adjustment involves the influence of protective factors and resources (such as

communication, conflict resolution, spending time together and having a functional routine) that facilitate the family's ability to function in the face of risk factors and fulfil developmental tasks (McCubbin & McCubbin, 1996). These protective resources help the family system to be *resistant* to disruption when faced with a stressor (McCubbin & McCubbin, 1996). When the system's equilibrium cannot be maintained successfully, the family experiences a crisis (McCubbin & McCubbin, 1996). Thus, the family enters the adaptation phase. Adaptation encompasses recovery factors that assist the system in *restoring* harmony and balance after a crisis has caused disequilibrium (McCubbin & McCubbin, 1996). This second phase involves greater restructuring and reorganising so that balance and productive functioning are regained, thus enabling the family to bounce forward (McCubbin & McCubbin, 1996). These two phases will now be focussed on.

### 2.3.5.1 The adjustment phase of the Resiliency Model

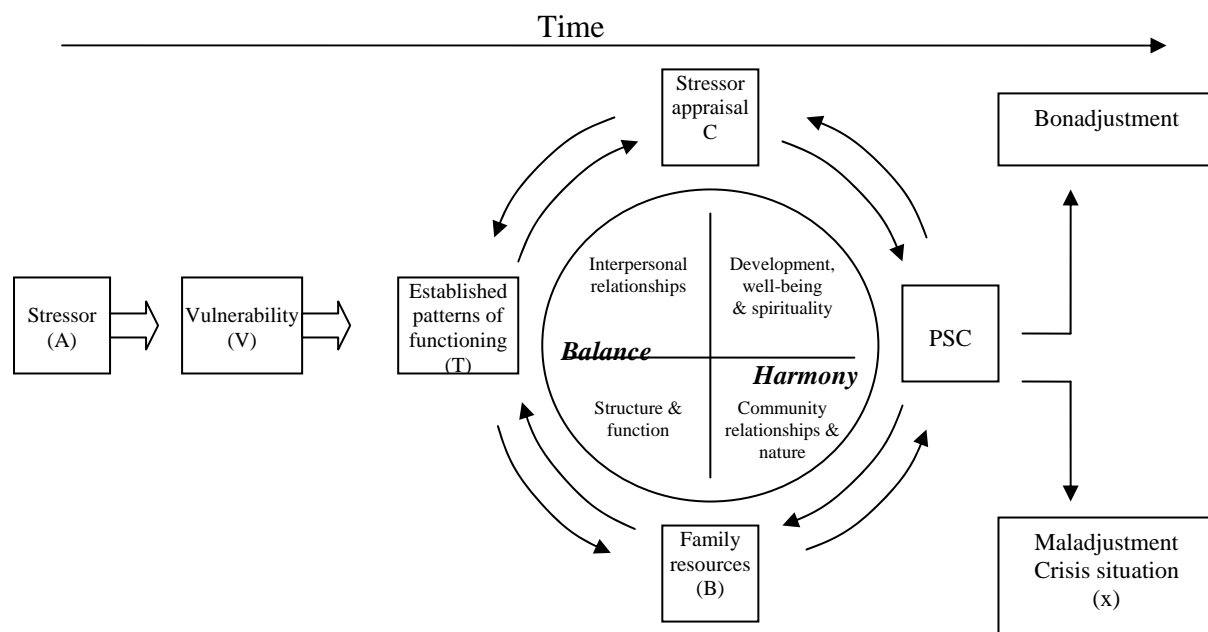


Figure 2.4. The Adjustment Phase of the Resiliency Model of Stress, Adjustment and Adaptation, adapted from McCubbin & McCubbin (1996).

The adjustment phase of the Resiliency Model (see Figure 2.4) proposes that, when a family faces an adverse stressor, a sequence of components (A, V, T, B, C, PSC) interact with one another to produce a specific family outcome (McCubbin & McCubbin, 1996). This outcome is situated on a continuum, with successful bonadjustment at one end of the spectrum and maladjustment at the other (McCubbin & McCubbin, 1996). Bonadjustment means that the family has maintained its patterns of functioning to a large extent and has regained balance and harmony in the four main areas of family functioning: interpersonal relationships; development, well-being and spirituality; structure and functioning; and community relationships and nature (McCubbin & McCubbin, 1996). On the other hand, when maladjustment occurs, the family experiences a crisis (X), which requires greater and more permanent modifications to family patterns in order to recover and regain optimal functioning (McCubbin & McCubbin, 1996). The sequence of components unfolds as follows: the family is confronted by a stressor (A) with a particular level of severity (McCubbin & McCubbin, 1996). A pile-up of other concurrent family strains affects the degree of family vulnerability (V) (McCubbin & McCubbin, 1996). The stressor (A) interacts with vulnerability (V) and subsequently interacts with the family's typology (T) (McCubbin & McCubbin, 1996). All of these interact with the family's resistance resources (B) (McCubbin & McCubbin, 1996). Resistance resources (B) interact with the family's appraisal and assessment of the stressor (C), which in turn interact with the family's coping strategies and problem-solving approaches (PSC) (McCubbin & McCubbin, 1996). Each of these components will now be defined further and discussed briefly.

#### 2.3.5.1.3 The stressor (A)

A stressor is seen as an event (such as the death of a child) or life transition (such as remarriage) that confronts the family unit. This event either produces or has the potential to produce changes in this social system and may affect some domains of family life, or all of

them (McCubbin & McCubbin, 1996). The severity is assessed by the degree of threat it poses to the family unit's stability and how much it disrupts the family's functioning (McCubbin & McCubbin, 1996). The threat may also be deemed severe if it places extensive demands on the family's resources (McCubbin & McCubbin, 1996). The severity may be different for different families, depending on the hardships that arise.

#### 2.3.5.1.2 Family vulnerability (V)

Family vulnerability is the current interpersonal and organisational condition of the system (McCubbin & McCubbin, 1996). These conditions are affected by (1) the pile-up of intra- and extra-familial demands (such as a chronically ill child, or relocation to another city) and (2) the family's current life cycle stage imposing a series of normative challenges and demands (McCubbin & McCubbin, 1996).

#### 2.3.5.1.9 Family typology (T) of established patterns of functioning

How the system typically operates is defined by its typology, which is a configuration of predictable and expected qualities and behaviours (McCubbin & McCubbin, 1996). It is important that a family has the ability to withstand disruption of these patterns of functioning (McCubbin & McCubbin, 1996). However, the system must also be flexible enough to allow new functional patterns and operational strategies (McCubbin & McCubbin, 1996). These patterns are central to the process of maintaining and restoring harmony and balance within the family unit (McCubbin & McCubbin, 1996).

#### 2.3.5.1.10 Family resistance resources (B)

Family resistance resources (B) are skills, abilities and strengths that help the family unit manage and cope with the demands placed on them by the stressor (McCubbin & McCubbin, 1996). They assist the family's adjustment by promoting harmony and balance within the

system, thus buffering against a crisis situation (McCubbin & McCubbin, 1996). These factors shield against significant disruption to the established patterns of functioning, helping the family stand firm in the face of adversity (McCubbin & McCubbin, 1996). Resistance resources include factors like social support networks, financial stability, healthy and open communication patterns, shared spiritual values, flexibility and cohesiveness (McCubbin & McCubbin, 1996). More importantly for the purpose of this study, healthy and functional family routines are a critical resource that assists families in resisting disruption (McCubbin & McCubbin, 1996).

#### 2.3.5.1.11 Family appraisals of the stressors (C)

The family's appraisal of the stressor (C) relates to how the family members define the significance and gravity of the stressor and the possible hardships that could ensue (McCubbin & McCubbin, 1996). The family's views are situated on a continuum: on the one end of the spectrum they may view the stressor as relatively insignificant, manageable and a challenge with the potential to produce growth and maturation (Hill, cited in McCubbin & McCubbin, 1996). On the other hand, they may see it as overwhelming, unmanageable and potentially so destructive that it could cause the dissolution of the entire unit (Hill, cited in McCubbin & McCubbin, 1996).

#### 2.3.5.1.12 Family problem solving and coping (PSC)

The family system is hypothesised to be a resource-exchange network, applying various resources to meet the demands of the stressor (McCubbin & McCubbin, 1996). Problem solving and coping relate to the family's ability to generate and apply effective strategies by utilising appropriate skills and resources so that the stressor's demands are minimised, managed or eliminated (McCubbin & McCubbin, 1996). Problem solving includes breaking down and organising the stressor into manageable parts; applying flexible and appropriate



strategies to each of the different components; taking action to solve interpersonal issues; as well as developing and promoting constructive communication patterns that are conducive to effective problem solving (McCubbin & McCubbin, 1996). Coping is seen as both the active and passive strategies engaged in during these adverse times that ensure the continued emotional well-being of each individual family member, the preservation of the family as a unit, the alleviation and resolution of hardship initiated by the stressor, and the seeking and harnessing of new resources (either from within the family or the community) that will assist coping (McCubbin & McCubbin, 1996).

#### 2.3.5.1.13 Family response: distress or eustress

It is clear that whenever a family is faced with a stressor it produces tension within the family system, causing stress. The amount of stress experienced may reflect either a state of distress (a negative reaction to stress) or eustress (a positive reaction to stress) (McCubbin & McCubbin, 1996). Whether the family experiences distress or eustress is mediated by several factors: the severity and intensity of the stressor they face (A), the family's assessment and anticipation of the stressor, the pile-up of concurrent strains (V), the family members' psychological and physical well-being at the onset of the stressor, and the resources and capabilities that are available to them (McCubbin & McCubbin, 1996). In a cyclical process, the family attempts to alleviate the tension using their established patterns of functioning (T), resistance resources (B), stressor appraisals (C), and problem-solving and coping skills (PSC) (McCubbin & McCubbin, 1996). When these interacting factors produce a situation of disharmony and imbalance, and the family is unable to reduce or eradicate the negative conditions, they experience the stressor as a threat to the family unit and encounter a state of distress (McCubbin & McCubbin, 1996). At the other end of the scale, a state of eustress is when the family embraces the disharmony and imbalance rippling through the system, and views it as an opportunity for growth and maturation (McCubbin & McCubbin, 1996).

#### 2.3.5.1.14 Bonadjustment, maladjustment and crisis

Most presenting stressors do not require major change and restructuring within the family system, because the family's typology, appraisals, resistance resources and problem-solving and coping strategies are adequately applied to reduce the threat (McCubbin & McCubbin, 1996). Though some adjustments are required in the patterns of functioning, the family system retains or regains its balance and harmony (bonadjustment). In contrast, some stressors are substantial and require extensive modifications to attain balance and harmony (McCubbin & McCubbin, 1996). When this occurs, the family enters a crisis situation (X) (McCubbin & McCubbin, 1996). A crisis is an enduring state of disruption, disorganisation, and ineffectiveness in the system (McCubbin & McCubbin, 1996). However, the term crisis should not be seen or used as a derogatory term, labelling the family in this phase as dysfunctional and requiring therapy. Most families at this stage go on to successfully navigate the crisis situation and adapt to the stressor (McCubbin & McCubbin, 1996). Thus, McCubbin and McCubbin (1996) see crisis as a normative process. In order to climb out of this cycle and overcome the crisis, the family must now make significant changes (adaptations) (McCubbin & McCubbin, 1996). When a family is at this juncture, the adaptation phase of the Resiliency Model is initiated (McCubbin & McCubbin, 1996). This phase will now be discussed.

#### 2.3.5.2. The adaptation phase of the Resiliency Model

The adaptation phase of the Resiliency Model is displayed in Figure 2.5. It illustrates the resilience processes involved in the second stage of recovery, as the family attempts to regain balance and harmony after failing to do so during the adjustment process (McCubbin & McCubbin, 1996).

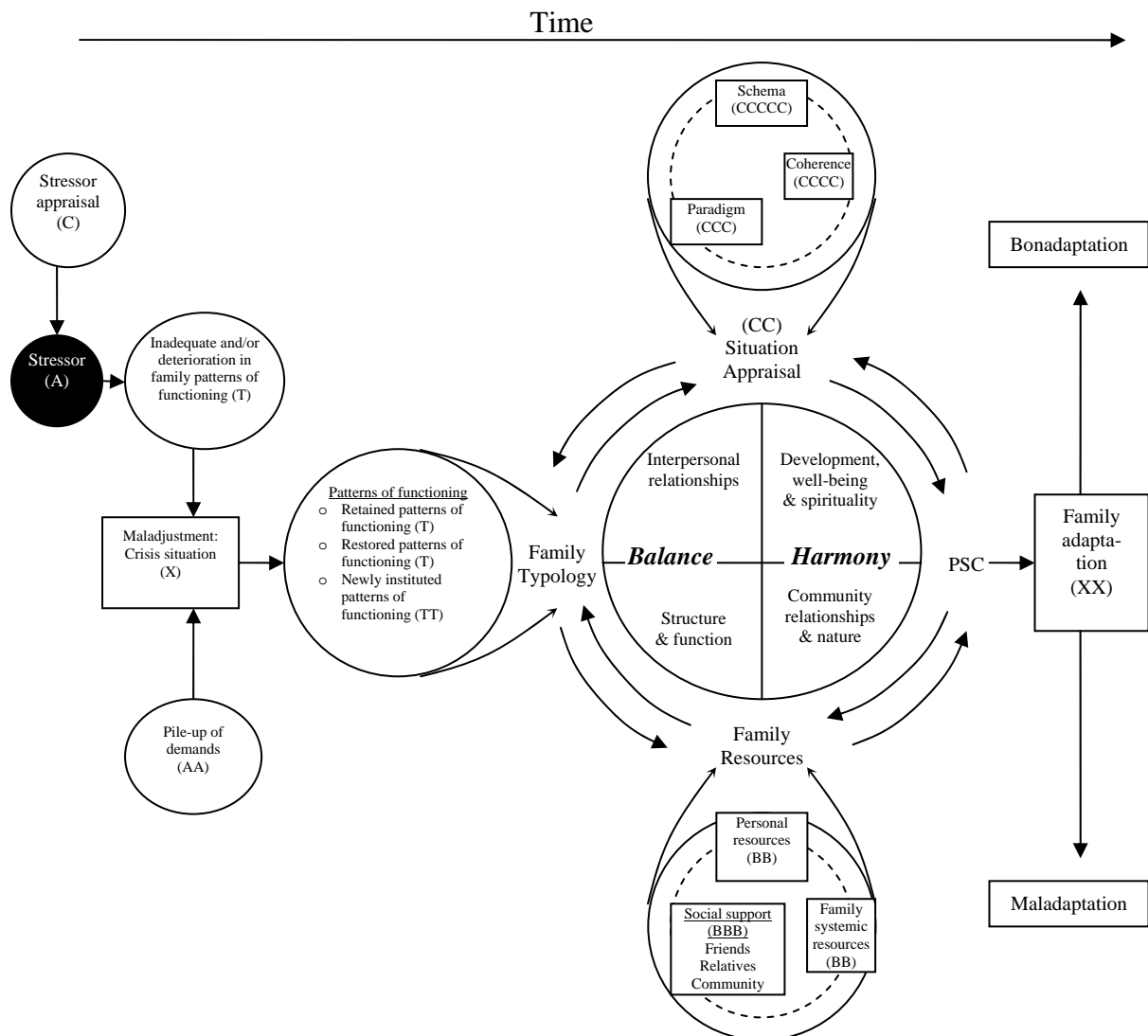


Figure 2.5. The Adaptation Phase of the Resiliency Model of Family Stress, Adjustment and Adaptation, adapted from McCubbin and McCubbin (1996).

As is clear from Figure 2.5, the family's established patterns of functioning (T) were previously inadequate and insufficient in addressing the stressor (A) and are now deteriorating. Thus, the onset of the adaptation phase is marked by a situation of maladjustment and crisis (X) (McCubbin & McCubbin, 1996). However, the crisis situation is further exacerbated by the pile-up of concurrent demands and strains (AA) (McCubbin & McCubbin, 1996). Concurrent demands may include the unfolding of the family life cycle

causing further life transitions; current strains caused by previously unresolved stressors; and situational and contextual demands such as poverty or war. At this juncture, greater changes are now required if the family is to succeed in restoring balance and harmony (McCubbin & McCubbin, 1996). Again, the outcome of the adaptation process (XX) is situated on a continuum, with bonadaptation at one end of the spectrum and maladaptation at the other extreme (McCubbin & McCubbin, 1996). With bonadaptation, the family is successful in regaining harmony and balance in the four family domains of interpersonal relationships; structure and functioning; development, well-being and spirituality; and relationships with the community and the natural environment (McCubbin & McCubbin, 1996). Failure to achieve these goals leads to maladaptation (McCubbin & McCubbin, 1996). The processes involved in adaptation, affecting its eventual outcome, are family typology (T and TT), family resources (BB) and social support (BBB), family appraisal processes (C, CC, CCC, CCCC, CCCCC), and problem solving and coping (PSC). These will now be discussed.

#### 2.3.5.2.6 Family typology (T and TT)

Family typology (T and TT) is one adaptation-orientated process that comes into play as the family continues along the time line and starts to tackle the situation (McCubbin & McCubbin, 1996). On the one hand, the family retains some of its established patterns of functioning (T), carried over from the adjustment phase (McCubbin & McCubbin, 1996). Some of these need to be eliminated, but others provide continuity to family life and are preserved, amended or restored (McCubbin & McCubbin, 1996). On the other hand, the family also has to institute new and innovative patterns (TT) that could effectively revive balance and harmony (McCubbin & McCubbin, 1996).

#### 2.3.5.2.7 Family resources (BB) and social support (BBB)

Adaptation (XX) is dependent on the family's own internal resources (BB), as well as on their network of social support (BBB) (McCubbin & McCubbin, 1996). The network of social support (BBB) refers to community institutions and people outside the family system that provide assistance in gaining harmony and balance (McCubbin & McCubbin, 1996). Family internal resources (BB) refer to the strengths and capabilities possessed by the family unit (time spent together, healthy communication patterns, cohesion, sense of unity, etc.) as well as by each individual member (psychological health, personality traits, effective coping strategies, self-esteem, knowledge and skills), that promote change so that balance and harmony can be restored (McCubbin & McCubbin, 1996). As with the adjustment phase, having healthy family routines is also a systemic family resource during adaptation. However, instead of resisting disruption as before, routines can be used here to facilitate change, ensuring a smooth transition.

#### 2.3.5.2.8 Family appraisal processes (C, CC, CCC, CCCC, CCCCC)

Family appraisal processes also play a major role in family adaptation. These can be broken down into five constituents (McCubbin & McCubbin, 1996). The first constituent is *family schema* (CCCCC), defined as the family's shared values, convictions, goals, beliefs, expectations and priorities (including cultural values and ethnic identity) (McCubbin & McCubbin, 1996). The second is *family coherence* (CCCC), referring to the family's dispositional world view (McCubbin & McCubbin, 1996). This displays their level of confidence in the world's comprehensibility and meaningfulness (McCubbin & McCubbin, 1996). The third is termed *family paradigms* (CCC), which are shared expectations and rules about how the family will function in various family domains (e.g. child rearing or labour division) (McCubbin & McCubbin, 1996). These three elements jointly affect how the family appraises the situation (CC) and appraises the stressor (C) (McCubbin & McCubbin, 1996).

#### 2.3.5.2.9 Problem solving and coping (PSC)

As in the adjustment phase, problem-solving and coping (PSC) strategies also play a vital role in the adaptation phase (McCubbin & McCubbin, 1996). They ensure that the family utilises and applies its resources effectively and appropriately to meet each of the demands posed by the stressor (McCubbin & McCubbin, 1996).

#### 2.3.5.2.10 A dynamic, cyclical process

The family's typology (T), resources (BB and BBB) and appraisals (CC), together with the families problem-solving and coping (PSC) abilities, are involved in a dynamic, relational and cyclical process over time (McCubbin & McCubbin, 1996). Thus, the family first assesses the situation (CC). With their problem-solving and coping strategies (PSC) they effectively utilise their resources (BB and BBB) and make new amendments to their patterns of functioning (TT). The goal is relational balance and harmony (McCubbin & McCubbin, 1996). When the family members achieve their goal and the outcome (XX) lies at the positive end of the continuum, they experience bonadaptation (McCubbin & McCubbin, 1996). On the other hand, when balance and harmony are not restored and the family outcome (XX) is maladaptive, the cycle starts anew (McCubbin & McCubbin, 1996). In such a case the changes to the system were not sufficient in meeting the demands, and more change is required. Consequently, the family appraises the situation (CC) again and considers the effectiveness of their previous amendments. Again they engage in problem solving and coping (PSC), strategising on what resources (B, BB and BBB) should be applied next to address systemic demands. In other words, maladaptation does not imply a fate of perpetual crisis, doom and family dissolution. It is merely one step on the road to recovery and the family resumes its efforts until the crisis is resolved (McCubbin & McCubbin, 1996).

### 2.3.5.3 Conclusion to the Resiliency Model of Family Stress, Adjustment and Adaptation

To summarise, the Resiliency Model of Family Stress, Adjustment and Adaptation illustrates that the family is a system moving through time. It is made up of developing individuals and surrounded by an unstable, fluctuating environment. Thus, facing change and dealing with stressful life events are an inevitable part of family life. The adjustment and adaptation processes represent efforts to respond to these challenges, regain balance and harmony, restore emotional and physical well-being, and promote development on both an individual-to-family and a family-to-community level (McCubbin & McCubbin, 1996). In order to meet systemic challenges, change in family life must both be resisted where appropriate and embraced when necessary. Thus, when faced with a stressor, the family first attempts to resist systemic disruption during the adjustment period and only makes minor amendments to keep balance and harmony intact. When maladjustment occurs and it is impossible to regain stability and satisfactory functioning with minor adjustments, the family embarks on a dynamic process of major systemic restructuring and transformation. It is an essential endeavour if the family is to respond to both intra-familial and extra-familial demands. In both these processes, family typology, appraisals, resources, and problem-solving and coping abilities affect success. Within this perspective, stress is not automatically pathologised, but seen as a normative response to the demands of existence (McCubbin & McCubbin, 1996; Walsh, 2003).

Using the Resiliency Model helps clinicians and researchers to see families as active players in meeting these demands, rather than passive victims (McCubbin & McCubbin, 1996). Because the model includes family features such as culture and ethnicity, and embraces the existence of family diversity, it is a fitting model to use in the culturally diverse South African context. There are a range of South African studies that have used this model to investigate resilience in a diversity of family forms and family situations. Examples include

families in which a parent accepted a voluntary teacher's retrenchment package (Der Kinderen & Greeff, 2003), families that experienced the death of a parent (Greeff & Human 2004), divorced families (Greeff & Van der Merwe, 2004), families in which one member has been diagnosed with a psychological disorder (Greeff, Vansteenwegen & Ide, 2006), remarried families (Greeff & Du Toit, 2009), South African and Belgian single parent families (Greeff & Aspelung, 2007), and young families going through the transition to parenthood (Walters, 2009).

### 2.3.6 Family routines during adjustment and adaptation

As is recognised by McCubbin and McCubbin (1996), and confirmed by multiple research studies (Black & Lobo, 2008; Fiese et al., 2002; Greeff & Du Toit, 2009; Greeff & Wentworth, 2009; Walsh, 2003; Walters, 2009), family routines can serve as an important tool in the adjustment as well as the adaptation process during times of family stress and distress. This brief section hypothesises how family routines may function during these processes as both a buffer against disruption and an instrument in regaining balance and harmony.

On the one hand, family routines help give structure, stability and continuity to daily life and thus ensure the *resistance* of excessive family change and disruption during adjustment. Even in the face of some disequilibrium, certain aspects of the day will remain predictable and orderly, thus decreasing the sense of chaos and uncontrollability. On a functional level they also facilitate the execution of a range of important family tasks (such as the preparation of food), thus ensuring the continued sustenance of the family. When the family's daily routine is stable and well oiled, tasks can be performed on autopilot, leaving needed energy to attend to other critical matters, such as acquiring community resources or taking care of emotionally vulnerable family members. Family routines are also important settings in which social



support is maintained. Thus, regularly eating together around the dinner table, visiting relatives once a week, or reading bedtime stories to children each night, facilitate relational connection, emotional nurturance and regular communication. These are crucial elements if balance and harmony are to be maintained or restored in the system. On the other hand, restructuring certain family routines may help the family *embrace* major change during adaptation. Adapting family routines to accommodate new patterns of functioning and additional tasks, or to acquire essential family resources, may assist the family in smoothing over major transformation.

In terms of the transition to parenthood, Walters (2009) found that there was a strong, significant positive correlation between measures of family adaptation and family routines in families that had just undergone this developmental shift. The quantitative findings were also corroborated by qualitative data. Twenty-four percent of participants (N = 89) mentioned that family routines assisted them in adapting to the child and helped them to keep the family functioning (Walters, 2009). These routines provided “predictability of events” and served as “emotional anchors that offer safety and connection for family members” (Walters, 2009, p. 89). Besides a correlation with family adaptation, other researchers have found correlations between family routines and more specific, positive family features during the transition to parenthood. For instance, Sprunger, Boyce and Gaines (1985) found a relationship between higher levels of satisfaction and feelings of competence in mothers with infants. Mindell, Telofski, Wiegand and Kurtz (2009) also found a significant reduction in the problematic sleep behaviours of toddlers and infants, as well as an improvement in mothers’ mood state. In addition, routines are associated with shorter periods of respiratory infection in infants (Boyce et al., 1977). All of these factors could play a role during the transition to parenthood, decreasing individual vulnerability and boosting a sense of mastery. Predictable routines

ensure that children are healthier and better regulated and, in turn, healthy children make parents feel more capable in dealing with the child's demands (Fiese et al., 2002).

In the first three sections of this chapter, general theories and models of normative family functioning were discussed. These three sections presented the family as a multigenerational system situated within a multi-level context that moves and develops through time. Although the previous theories mentioned the presence of family routines as a potential family resource that assists adjustment and adaptation during the transition to parenthood, they did not elucidate what is meant by this construct, or unpack which potential variables affect how and why families develop, structure and organise their family routines. The next and final section of this chapter will focus on the construct of family routines.

#### 2.4 Family Routines and Ecological-cultural Niche Theory

The discussion in this section will focus on family routines. In the first part of this section I define the term and problematise some of the definitions presented by researchers. The second section presents a possible way of operationalising the family routine construct, which has informed my approach to studying this family phenomenon. Ecological-cultural Niche Theory (from here on Ecocultural Theory), which was proposed by Weisner and elaborated on by colleagues (see Gallimore et al., 1993; Weisner, 2002a, 2002b; Weisner et al., 2004), was a key influence in my theoretical understanding of family routines. Thus, I will briefly consider the theoretical background from which Ecocultural Theory developed and, finally, I elaborate on the theory's specific theoretical assumptions, presenting several fundamental components of the framework.

#### 2.4.1 Defining the family routine construct

Defining the concept of *family routine* is a cumbersome task fraught with various challenges. The first is that, although most people assume they know instinctively what the concept means, there are many different definitions (Fiese et al., 2002). Each family has its own individualised and personalised range of family routines (Fiese et al., 2002), because these routines have been arranged according to the family's unique ecological and cultural context; family structure; regulatory rules and roles; set of values, beliefs, and motivations; range of resources; and unique unfolding challenges. It is this individualised and personalised pattern of functioning that may provide special meaning to family group activities, but because of its uniqueness, there is disparity in how the construct is conceptualised (Fiese et al., 2002).

The second obstacle that needs to be addressed is a variation in the use of language. An overview of the literature showed that researchers do not make a distinction between the concept of family routine that represents a specific activity that the family habitually engages in (such as eating together or reading stories before bedtime), and the concept of family routine that constitutes the family's entire daily or weekly schedule. The first use refers to one predictable daily activity available from a whole range of other predictable and habitual family activities. On the other hand, the second use of the concept refers to the sum total of these daily or weekly activities that are structured and organised into a set pattern. Researchers usually leave it up to the reader to infer how the term is being used.<sup>1</sup> The discrepancy is caused by an inconsistency in the use of semantics, rather than by a fundamental debate or disagreement about the characteristics of family routines. I, however, recognise that this might become confusing so I propose using *Routine* with a capital letter

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<sup>1</sup> When theorists like McCubbin and McCubbin (1996), Walsh (2003), Howe (2002) and Fiese et al. (2002) write about family routines they refer to the various habitual family activities and practices that differ from each other (e.g. a bathing routine versus a dinner routine). Researchers like Weisner (2002a, 2002b) call these various routine practices *activity settings* and then uses the term *family routine* to refer to the entire daily schedule.

when referring to the collective daily schedule, and using the word *routine* without the capital *r* to refer to the individual activities/tasks/practices.

The third obstacle is theoretical disagreement about the fundamental constituents of the construct and its conceptual boundaries. Wolin and Bennett (cited in Fiese et al., 2002) first proposed that families organise their lives around a multitude of activities that cultivate family identity. These can be arranged into three categories, namely family traditions, family celebrations, and patterned family interactions (Wolin & Bennett, cited in Fiese et al., 2002). They defined family routines as these patterned family interactions that are repeated over time (Wolin & Bennett, cited in Howe, 2002). However, this definition is not specific enough to distinguish family routines from other family phenomena such as family rituals. In a review of fifty years of research on naturally occurring family routines and rituals, Fiese et al. (2002) distinguished between routines and rituals along the dimensions of communication, commitment and continuity. Firstly, Fiese et al. (2002, p.382) proposed that family routines express to family members “this is what needs to be done”, whereas rituals convey to them “this is who we are”. In other words, routines involve instrumental communication, whereas rituals involve symbolic communication. Secondly, Fiese et al. (2002) propose that routines only compel momentary and perfunctory commitment, thus causing very little afterthought when the activity is complete (Fiese et al., 2002). In contrast, the commitment to rituals is enduring and affective because rituals foster a sense of belonging (Fiese et al., 2002). Rituals have a lingering effect, leaving some emotional residue (Fiese et al., 2002). Family members often try to mentally recapture their experiences after the activity has ended (Fiese et al., 2002). This difference in commitment is illustrated by contrasting regular grocery shopping (which is seen as a routine because it might leave no emotional connection or after thought), and a Sunday afternoon roast with the entire family (which is seen as a ritual because it leaves emotional residue in the minds of family members). Thirdly, considering the

dimension of continuity, both routines and rituals display continuity, but of a different kind. Routines display consistent behaviour, which is repeated over time; whereas rituals contain continuity of meaning (Fiese et al., 2002). The meaning conveyed by rituals extends across generations, and family members expect to keep the customs and practices alive for future generations (Fiese et al., 2002). They create a sense in them that this is how they have always performed these activities and this is how they will continue to do so in the future (Fiese et al., 2002). Finally, disrupted routines are merely experienced as a hassle or irritation, whereas disrupted rituals are experienced as a danger to group identity (Fiese et al., 2002). According to Fiese et al. (2002), any routine can become a ritual when it moves from instrumental communication to symbolic communication. When a family has dinner together every night purely for the sake of nourishment it is considered to be a routine. However, when mealtime includes family inside jokes, symbolic objects, affective reactions, handed down things (such as acts, objects or conversations) from previous generations (e.g. prayers), and behaviours meaningful only to the group, it is classified as a ritual (Fiese et al., 2002).

Although the distinction made by Fiese et al. (2002) is a useful attempt at delineating the conceptual boundaries between these two terms, it does pose a few problems. Gallimore et al. (1993) suggest that *all* family routines (described as *activity settings*) are socially constructed by the members involved in the activity, and thus each aspect of the activity setting (e.g. the people involved, the scripts for conduct, the instruments used, the place chosen for the interaction, and the motives and purposes directing the activity) is influenced by the meanings the family members attach to these features. Gallimore et al. (1993) state that this meaning is a “complex mix of ecological, cultural, interactional and psychological features” (p. 537). For instance, imagine a family during a dinnertime routine. For theoretical purposes, suppose that this activity is not a ritual. Thus, no symbolic communication occurs between the family members during dinner and there are no behaviours or objects that have been

handed down from previous generations. It also leaves no emotional residue in the minds of the family members. However, as is customary in European cultures, the family sits around a table and uses knives and forks as opposed to sitting on the floor using chopsticks. Even this mundane feature of their routine conveys a small degree of symbolic meaning and group identity. The instruments and setting chosen by this family express something about their ethnic identity. Thus, in practical terms it is very hard to separate routines from rituals, because all family routines (and their specific features) are influenced by family schemas, customs, cultural values and beliefs, which communicate some sense of “who they are” as a group.

Often, recurring patterned activities are much more complex than the scenario described above. During a simple dinnertime activity there will usually be countless symbolic as well as instrumental communications. The same goes for story time, or getting ready in the morning, or even dropping children off at school. It is also very difficult to separate the “this is what needs to be done” from the “this is who we are”, because most families will say “this is what needs to be done *because* this is who we are”. Thus, instrumental and symbolic communications are inextricably linked to each other.

Most researchers do not distinguish between routines and rituals (Fiese et al., 2002). Although Fiese et al. (2002) see this as a limitation of these studies, it is perhaps a practical solution to the dilemma described above. For the purpose of this research it would be a rather cumbersome and impractical endeavour to delineate whether a family activity is a routine or a ritual by using the distinction proposed by Fiese et al. (2002). What degree of meaning would constitute a ritual and what degree of instrumental communication would constitute a routine? It might also be arbitrary to classify the same patterned activity (e.g. dinnertime) of different families into separate categories because of the difference in amount of symbolic

meaning they attach to the activity. It is exactly this disparity in meaning and cultural difference that highlights the importance of studying family routines in various groups of families (Gallimore et al. 1993; Weisner 2002a, 2002b).

It seems that there is no single definition accurate and specific enough to distinguish the construct of family routines from other family phenomena, and yet, at the same time, broad enough to include the multitude of various activities and features referred to by the concept. Because of these difficulties I am of the opinion that the construct should be seen as an umbrella term similar to the terms religion, or sport, which include an array of different activities and features. Rather than defining the concept by finding one, universal quality present in all these activities, it should be defined by using a range of broad characteristics. Based on research findings, Howe (2002) proposes a number of these unique characteristics that distinguish family routines from other phenomena:

1. Family routines involve family interactions.
2. Family routines reflect the work of daily living.
3. They are interactions that are repeated frequently on a daily to weekly basis.
4. Most have a cyclical period of recurrence. For instance, eating dinner together happens every 24 hours.
5. The cyclical course often unfolds parallel to physiological, circadian rhythms such as hunger or sleep-wake cycles. The cyclical character is also influenced by the cyclical nature of extra-familial forces that interrupt family life, such as work and school schedules (e.g. getting ready each morning before leaving the house).
6. They are episodic and thus they have a relatively clear beginning and end. Therefore, laying the table and sitting down are the start of the dinnertime routine, and clearing the dishes signifies the end.

7. Routines have internal regularity, implying that, while the routine is enacted, the family's behaviours and interactions follow a set pattern, or at least a similar one.
8. Finally, each routine is an activity directed by a communal goal. Different routines are distinguished from each other by the different goals they serve. Thus, a dinnertime routine has the primary goal of sustenance, whereas reading bedtime stories may have the primary goal of getting a child settled and ready for bed.

Using these characteristics to define family routines allows for a complex intermingling of both instrumental and symbolic communication. Also, the commitment that family members have towards these activities may be perfunctory and momentary, or enduring and affective. These activities may also display various degrees of continuity in both behaviour and meaning. Taken together, these characteristics are both specific enough to delineate the theoretical boundaries of the family routine construct and broad enough to include the multitude of individualised and personalised patterned activities that families engage in on a recurring basis.

#### 2.4.2 Operationalising the family routine construct

According to Gallimore et al. (1993), family routines or activity settings have two interconnected constituents, namely objective and subjective conditions. Objective conditions constitute the observable features of the routine. These include *the people* who are involved in performing the activity, the *behaviours* enacted or *scripts* that are followed, the *tools and resources* that are used, and the *places* the activity is performed in (Gallimore et al., 1993). In contrast, subjective conditions are the meanings the family and its individual members attach to these routines. These are often not as visible to outsiders. Subjective features include the *value* the family attaches to the routine, what *motivates* the family to perform the routine, and what the family believes is the *purpose* of the routine (Gallimore et al., 1993). But it is not



just the meanings they attach to the routine as a whole, but also the meanings they attach to each of the specific objective conditions mentioned above. Thus, what is the value, motivation and purpose of involving *these particular people* in the activity; what is the value, motivation and purpose of performing *these specific behaviours*; what is the value, motivation and purpose of using *these specific tools*; and what is the value, motivation and purpose of performing the task in *these particular places*. Subjective features thus influence whether the family believes the activity is important; who they think should be involved in the activity; and how and where the activity should be accomplished (Gallimore, et al., 1993). Consequently, Gallimore et al. (1993) propose that, when activity settings are studied, five variables must be considered:

- (1) personnel present during an activity, (2) salient cultural values and beliefs, (3) the operations and task demands of the activity itself, (4) the scripts for conduct that govern the participants' actions, (5) the purposes or motives of the participants. (p. 542)

Operationalising activity settings in this way ensures that both subjective and objective features are taken into account (Gallimore et al., 1993). The interview schedule (used as the primary data collection tool in this study) was informed by these subjective and objective features (see Chapter 3 for a discussion of the methodology used in this study).

#### 2.4.4 Historical and Theoretical Origins of Ecocultural Theory

Weisner's ecocultural model draws from a variety of academic influences, such as the area of human development and especially the interdisciplinary field of psychological anthropology. Weisner (2002b) worked with pioneering psychological anthropologists John and Beatrice Whiting, who developed a psycho-cultural model of human development. Weisner's

conceptualisation of child development is an extension of the Whittings' work (Gallimore et al., 1993).

In the mid-20<sup>th</sup> century there was a particular school within psychological anthropology that looked at culture and personality and endeavoured to understand the origin of human personality (Super & Harkness, 1997). The Whittings, who came from this school of thought, believed that insight into an individual's development was only possible through a careful examination of the environmental and social context within which individuals (as well as their families and ancestries) are situated (Super & Harkness, 1997). Of particular importance is the Six Culture Study (Whiting & Whiting, cited in Super & Harkness, 1997), which led to the suggestion that children's behaviours are products of the immediate settings in which they are reared. These settings include the significant people with whom they frequently and routinely interact, the places where they regularly spend time together, and the roles and tasks they are assigned (Super & Harkness, 1997). Parents create and organise these everyday life activity settings, and it is through these culturally and environmentally specific creations that complex societal features are translated into proximate determinants of child and caretaker behaviour (Super & Harkness, 1997). As Whiting and Edwards (quoted in Super & Harkness, 1997) comment:

Our theory holds that patterns of social behaviour are learned and practiced in interaction with various types of individuals in a variety of settings. In part, the effect of culture on these patterns in childhood is a direct consequence of the settings to which children are assigned and the people who frequent them. Socialising agents orchestrate children's participation in these learning environments by assigning children to some and proscribing others. (p. 6)

Thus, one can infer a causal chain of events from the Psycho-cultural Model (Super & Harkness, 1997). In essence, the chain starts with the ecological, historical and social environment, which filters down and influences how parents structure their child's learning environment and, through this structuring, affect the child's development (Super & Harkness, 1997).

The Psycho-cultural Model was extended by associates and students of John and Beatrice Whiting (Levine; Monroe, Monroe & Whiting; Super & Harkness; Weisner, all cited in Gallimore et al., 1993). These extensions further impacted on the conceptualisation of Ecocultural Theory. Finally, concepts from Vygotsky's (cited in Gallimore et al., 1993) zone of proximal development and research, which elaborated on Vygotsky's theory (Gallimore & Goldenberg; Rogoff; Tharp & Gallimore; Weisner, Gallimore & Jordan; Wertsch; all cited in Gallimore et al., 1993), can also be credited for their influence on Ecocultural Theory.

The Ecocultural Model was initially used to study families with children with disabilities, and looked at the accommodations the family made in their daily routines to adapt to the challenges they faced. To date it has been used in research studying a variety of cultural contexts and situations, such as native Hawaiian children and families, Spanish-speaking children, Mexican and Central American immigrant parents, and Euro-American families who adopted non-conventional child-rearing practices and values (for a review see Gallimore et al., 1993). The model has also been used to study the routines of Chinese-American families, Asian immigrant families, Navajo and Japanese families, Italian families with young children, and working poor families who face welfare reforms (Weisner, cited in Janhonen-Abruquah, 2006).

#### 2.4.4 Ecocultural Theory

Ecocultural Theory provides a cross-cultural perspective of family routines and developmental pathways (Weisner, 1984). Cooking dinner together in the evenings, washing dishes, doing homework each afternoon, getting ready for school, soccer practice on Wednesdays, frequently visiting grandparents after school, feeding the family goat, storybook reading before bedtime – these routines are all said to be *activity settings* or *niches* (Gallimore et al., 1993). Collectively, these everyday practices in which child-adult interactions are embedded are the architects of daily family life. But more than that, these routines or activity settings provide a chance for development-sensitive interaction to take place between adult and child (Gallimore et al., 1993; Weisner, 2002a, 2002b).

The activity setting is seen as a crucial constituent in the successful development of the child (Weisner, 2002a, 2002b). This is where more capable individuals assist communicative and cognitive practices and the child learns to achieve more complex levels of functioning (Gallimore et al., 1993). Therefore, healthy development depends on these activity settings. Through “modelling, joint production, apprenticeship, and other forms of mediated social learning that are embedded in goal-directed interactions”, parents can introduce to their children the necessary skills and values needed to thrive in their ecological and cultural surroundings (Gallimore et al., 1993, p. 538).

The family’s ecological system includes aspects like climate, fauna and flora, class and economic disparities, agricultural structure, governmental policies, financial resources, medical aid availability, recreational opportunities, labour forces, working environment, and the educational system. The cultural system in which the family is embedded includes features like the various ideologies within the society (such as individualism or collectivism, capitalism or socialism, traditionalism or modernism), beliefs about gender roles, various

religious viewpoints, ethnic traditions, and ideas about morality. These two systems affect the *objective conditions* (people involved, behavioural scripts, instruments used, places enacted) of the family's routines, as well as the *subjective conditions and meanings* (values, motivations, and purposes) the participants attach to these routines.

Families from different cultural backgrounds and different geographical settings proactively construct for themselves a unique set of routines (with unique subjective and objective features) that help them adapt to their specific surroundings (Gallimore et al., 1993). Different ecological and cultural contexts will lead to vastly different objective and subjective conditions within a routine. To illustrate the theory, two hypothetical situations are compared: a middle-class family living in an urban South African community, versus a family living in a rural farming community in China. In both families the children have to feed animals as part of their daily chores. The South African children feed their cat, whereas the Chinese children feed the family chickens. Although these two routines seem similar, in that both involve the feeding of an animal twice a day, they represent different activity settings because they are motivated by different subjective conditions (Gallimore et al., 1993). The South African parents have chosen this chore because they believe it will impart the principles of empathy and responsibility, which are consistent with strongly held cultural views about child development in their society (Gallimore et al., 1993). In contrast, the Chinese parents have chosen this activity because they recognise that feeding animals is a crucial part of survival in rural China. Both sets of parents have chosen the specific objective features that will best support these subjective motivations. Thus, in terms of the people and instruments involved during the task, the Chinese parents have chosen animals that will most likely support the family's survival (chickens). In contrast, the South African parents have chosen an animal that will most likely advance an emphatic connection with the children (cat). In terms of behavioural scripts, the parents will engage in different styles when enforcing the routine,

because the gravity and value of the activities differ. If the Chinese children neglect their duties it would jeopardise the sustenance of the entire family and the task is enforced strictly, whereas feeding the cat is imposed leniently because if the children neglect their duties it will not be a threat to family survival. However, doing homework might be enforced very strictly in the South African family, because literacy and education are a major part of success in an urban environment.

Within the ecocultural framework there are five key principles about family routines that must be borne in mind, namely the family is both reactive and proactive when structuring routines to meet the demands of the environment; an ecological fit between the family and the environment is important; congruence and balance between family member's goals, needs and values are imperative; when parents choose and construct family routines they should be meaningful to them; and stability and predictability in family routines are essential (Gallimore et al., 1993; Weisner et al., 2004). These principles will be discussed briefly.

#### 2.4.4.1 Family reactivity, proactivity and adaptation

The particular context within which the family is situated is constantly fluctuating and thus exercises an influence on the family. The family is reactive when confronted with these demands and stressors, and respond to the best of their ability (Gallimore et al. 1993; McCubbin & McCubbin, 1996; Walsh, 2003). However, the family also takes a proactive stance and seeks to mitigate or transform these environmental impacts on daily life through various changes and accommodations (Gallimore et al., 1993). The term *accommodation* is a central part of the theory and is used as a technical term. Although Weisner and colleagues (Gallimore et al., 1993; Weisner et al., 2004) do not give a formal definition of the term accommodation, it seems that it merely refers to changes, whether proactive or reactive, that helps the family adapt to their current situation. The creation, maintenance and restructuring

of family routines are one form of these proactive accommodations (Gallimore et al., 1993). Family members are not seen as passive and helpless victims, but active agents, capable of changing, learning and affecting their immediate surroundings. According to Weisner et al. (2004), the on-going project of reshaping the family's daily Routine is vital for sustaining the family's social ecology, and is thus a universal adaptive task that all families must face.

#### 2.4.4.2 Ecological fit

An important variable affecting the sustainability of a family's routines is ecological fit, meaning the compatibility between family goals, and the resources or opportunities the environment provides for the attainment of those goals (Weisner et al., 2004). In other words, do environmental resources and opportunities (or limitations) support or impinge on what family members want to achieve with their daily routines, and how does the family balance scarce resources and competing interests to maintain satisfactory routines (Weisner et al., 2004)? When opportunities are limited and resources are inadequate, parents often have to make difficult compromises in their daily activities. For instance, economic climate and financial strain could force parents to choose between shared family activities or working long hours. When they are at home, what routines will they invest in during their limited time: activities that sustain marital intimacy, activities that promote the child's cognitive development, activities that advance emotional connection and bonding between parent and child, or activities that recharge worn-out batteries after a long day at the office? Weisner et al. (2004) stress that "ecological fit does not just mean more resources; it means that the resources available roughly match and support the activities that the family weaves into a daily Routine" (p. 10). Thus, even poor families can find adaptive solutions to sustain satisfactory routines if they adequately match their resources to attain their goals (Weisner et al., 2004).

#### 2.4.4.6 Congruence and balance

At some point, family members will inevitably differ in terms of their needs, goals and values (Weisner et al., 2004). In order to develop sustainable and satisfactory routines, parents need to assess these competing interests and juggle them to find an appropriate balance so that all family members are taken into account (Weisner et al., 2004). Parents should decide which family members' concerns should take precedence at what time (Weisner et al., 2004). When a family successfully manages these incongruent interests and ensures that all members' needs are met, it will foster optimal development and maturation.

#### 2.4.4.7 Meaning

Family members try to organise their routines in a personal way so that they reflect their cultural and moral viewpoints (Gallimore et al, 1993; Weisner, 2002b; Weisner et al., 2004). There are innumerable possible ways to respond to a child and to organise family life, but every family must choose activities that are meaningful and appropriate to their family and their cultural community (Weisner et al., 2004). Thus, only a small set of behaviours and routines will be acceptable to each family (Weisner et al., 2004). It is important that family members feel they make the right choices when structuring their routines.

#### 2.4.4.8 Stability and predictability

Change is an inevitable and necessary part of daily life, and sustaining and managing acceptable daily routines are dynamic processes that require constant modifications (Weisner et al., 2004). However, constant, chaotic and unpredictable change without meaning or fit, or balance, is not an adaptive outcome that is health promoting for children and parents (Weisner et al., 2004).



In summary, Ecocultural Theory postulates that the successful adaptation of a family hinges upon its members' ability to construct and sustain family routines that are appropriate for *their* particular values, goals and needs within their unique cultural and ecological context. These routines allow development-sensitive interactions to occur between the adult and child and help teach children how to survive and thrive within their environment. Within this framework, families are not passive victims but proactively involved in managing environmental resources to meet their goals and needs in a way that affirms their beliefs. Sustaining appropriate routines requires a good ecological fit between family needs and environmental opportunities, congruence and balance between family members' various needs, meaningfulness of family routines, and relative stability and predictability. This framework assists researchers in uncovering cultural patterns within populations by assessing trends in families' routines. However, although the theory holds that families within a particular cultural and ecological context will have similar family routines, researchers must be cautious with their conclusions because of the existence of within-culture variability and between-culture similarities (for a review see Gallimore et al., 1993).

## 2.5 Conclusion

So what does all of this mean for the study of family routines during the transition to parenthood, and how did the literature affect the formation of the research questions? In summary, four main theoretical frameworks were presented in this chapter that informed this research study. Firstly, the family life cycle perspective presents a workable framework for understanding the family. Based on these principles, the family is a goal-orientated system (made up of patterned, bi-directional connections between unique individuals) and is situated within larger social, cultural and environmental systems (Goldenberg & Goldenberg, 2008). Because a family system moves through the linear dimension of time it has to deal with both unexpected life challenges as well as normative life challenges, like the transition to

parenthood (McGoldrick & Carter, 2003). Similar to other expected and unexpected challenges that occur throughout the life cycle, the transition to parenthood causes disorder and discomfort. As Cowan and Cowan (2003) suggest, this disorder and discomfort occur in various family domains – domains from within the nuclear family system and domains from outside the nuclear system. The intra-familial domains include each individual parent's functioning, the couple relationship, and the parent's relationships with the child, whereas the extra-familial domains focus on the family members' relationships with extended family and grandparents, work life, and social support (Cowan & Cowan, 2003). The family's set of routines is another domain that experiences upheaval and change (Goldenberg & Goldenberg, 2008).

However, the literature makes it clear that although there is discomfort and change in these domains, each family's functioning will differ during the transition phases because of (1) various protective resources that the family can draw from, which help to buffer against the impact of the stressor, or (2) various barriers that can hinder their successful coping. Although the Resiliency Model (McCubbin & McCubbin, 1996) mentions family routines as one of these protective resources, McCubbin and McCubbin (1996) do not elaborate on how the family should establish such a set of family routines. It is still unclear what helps the family to structure, develop and maintain a healthy set of routines successfully. Furthermore, what are the barriers that could hinder the development and maintenance of such routines? It is likely, looking from a systems theory perspective, that again there would be various intra-familial and extra-familial barriers and resources that could affect the development and maintenance of routines. Because of this gap in the literature, two of the research questions in this study tried to contribute towards a better understanding of what these resources and barriers are. Thus, one of the research questions in this study asked: *What challenges do first-*

*time parents face in sustaining their daily routines?* The other, related research question is: *What assists first-time parents in maintaining their daily routines?*

According to the Resiliency Model (McCubbin & McCubbin, 1996), having a set of healthy family routines is a key resilience resource in both the process of adjustment (where routines help to *resist change* and keep some form of regularity and continuity in daily life) and of adaptation (where routines are used to *embrace major systemic change*, helping to establish new functional ways of operating). Where the mentioned two research questions deal with the ways in which families can resist change to their family routines and thus focus on the maintenance and sustainability of routines, the following research question focuses on change: *What accommodations to their routines do first-time parents make to adapt to the arrival of their first child?* Ecocultural Theory (Weisner et al., 2004) also emphasises the idea of adaptation and change within routines. It holds that a family routine is a complex set of accommodations chosen and structured by the family to achieve very particular family goals. A family's unique set of routines is both a reactive and proactive process/response to systemic challenges (Weisner et al., 2004). Because the environment and the family are constantly changing, accommodations to routines help the family members deal with the environment in a meaningful way and are a key component in achieving a healthy, development-enhancing and satisfactory family ecology (Weisner et al., 2004). Thus, even though a routine is by definition a habitual, stable activity, both the Resiliency Model and Ecocultural Theory emphasise that change, accommodations and adaptations are an inevitable part of the process and necessary for family survival. Consequently, it is important to gain a better understanding of how first-time parents change their set of routines from pre-birth to post-birth in order to cope with new system demands.

Another problem arising in the literature is uncertainty when trying to define the family routine construct, as is evident in discrepancies between researchers' explanations. Fiese et al. (2002) hold that family routines do not encompass deeper symbolic meanings, do not convey messages of belonging and group identity, and leave very little emotional residue and afterthought in the minds of family members. On the other hand, Gallimore et al. (1993) stress that cultural values, subjective motivations and deeper meanings play a crucial role in routines. It was felt that it would be impossible to study this psychological construct if there was no investigation into this matter, as the answer would greatly affect the formulation of any subsequent substantive theories. Thus, I felt it important to get clarity on why first-time parents feel their routines were important. If family routines are goal-directed activities, as Howe (2002) postulates, what would be the family's goals with these family routines: merely instrumental and practical, or more meaningful, symbolic, affective and developmental? Thus, one of the research questions is: *Why are family routines important to first-time parents?*

Lastly, because there are discrepancies in researchers' understanding of family routines, and because there are gaps within the existing theories on family routines, I thought it would be useful to have a broader qualitative question, one that could look at family routines afresh. This was also motivated by the fact that no research has been reported on the family routines of first-time South African parents. Thus, to foster the development of new ideas, the following basic question was asked: *What do family routines look like in the lives of first-time parents?* This research question was aimed specifically at common processes, rather than at creating a list of routines these families typically engage in. In Chapter 3 the methodology and research design that were used to address these questions are described.

## CHAPTER THREE

### RESEARCH METHODOLOGY

This study was directed by the following five research questions, each addressing different aspects of family routines during the transition to parenthood: (1) *What do family routines look like in the lives of first-time parents?* (2) *Why are family routines important to first-time parents?* (3) *What challenges do first-time parents face in sustaining their daily routines?* (4) *What assists first-time parents in maintaining their daily routines?* (5) *What accommodations to their routines do first-time parents make to adapt to the arrival of their first child?* This chapter focuses on the methods employed during the execution of the study. The chapter begins with a discussion on the research design and the reasons for utilising this specific qualitative method, followed by a description of the participants, the sampling methods used, the procedures that were followed during data collection, the particulars of the interview schedule, the methods used to analyse the qualitative data, ethical considerations, and procedures employed to ensure the trustworthiness of the results.

#### 3.2 Research Design

This study made use of a qualitative, grounded theory research design (Charmaz, 2008; Strauss & Corbin, 1990). It has been argued that qualitative research studies can make a substantial contribution to resilience research because they address various concerns raised by resilience researchers (Ungar, 2003). Ungar (2003) points out that qualitative research on resilience:

Is well suited to the discovery of the unnamed protective processes relevant to the lived experience of research participants; [provides] thick description of phenomenon in very specific contexts; [elicits] and [adds] power to minority ‘voices’ which account for unique localised definitions of positive outcomes; [promotes] tolerance for these localised

constructions by avoiding generalisation but facilitating transferability of results; and, [requires] researchers to account for their biased standpoints. (p. 85)

Besides the idea that qualitative research is important in terms of resilience research, it is also important for the study of family routines. Because research on family routines in South Africa is so scarce, it is important to gain an in-depth understanding of how South African parents manage new and healthy family routines in this particular ecological and cultural context. Learning from the participants how to understand their situation and how they manage change would generate richer information and greater understanding than pre-selected, quantifiable variables, or a priori ideas (Morse & Richards, 2002). Qualitative methodology is better suited for exploration because it will generate new and unexpected information in unfamiliar territory (Morse & Richards, 2002). Furthermore, the reason for choosing *grounded theory* methods as opposed to other qualitative methods was because they assist the researcher in analysing the data without the use of pre-selected coding categories (Henning, 2004). When using grounded theory methods, the researcher selects themes and codes from the data inductively (Henning, 2004). This inductive method may also provide a new and fresh perspective on the phenomenon under investigation (Morse & Richards, 2002). Lastly, because this study focuses on the transition to parenthood, it aims to understand how families manage change and process over a period of time. It aims to understand the complexity of that process. Grounded theory methodology is suited for this type of research and has become dominant in studies where the understanding of change and process is a central concern (Morse & Richards, 2002).

### 3.2. Sampling

Whether or not racial and ethnic categories should be used in research as demographic variables is a topic of contention. Fullilove (1998) advised researchers and authors to resist

using race as a variable, because “a long and distinguished scholarly tradition has made it clear that ‘race’ is an arbitrary system of visual classification that does not demarcate distinct subspecies of the human population” (p. 1297). In accordance with this statement by Fullilove (1998), this paper also rejects an essentialist point of view and contends that all cultural groups are socially constructed rather than genetically established (Hendricks, 2005). Furthermore, it is believed that, although there are similarities among the members of a group, there is also great diversity within a group, as well as similarities between groups (Gallimore et al., 1993; Hendricks, 2005). Particularly in South Africa, racial classification is a sensitive issue, since racial categories (Black, White, Coloured, Indian, etc.) were authored and perpetuated by the Apartheid regime.

However, the use of these categories in research today is neither rejected nor justified by identifying the level of similarities or dissimilarities among group members (Hendricks, 2005). It is also neither rejected nor justified by identifying who the authors are or were of these categories, or who is responsible for constructing these cultural identities (Hendricks, 2005). What is important is whether certain members of a society feel that, as a group, they are distinct from other groups within that society. It would be naïve to say that these racial identities do not have social meaning and material consequences (Hendricks, 2005). For the study of family routines, this may be particularly relevant, because families structure their family routines to proactively manage their cultural, ecological and economic contexts (Gallimore et al., 1993). Thus, it was decided to select participants from one population category. However, selection was based on the person’s self-perception and self-classification (Statistics South Africa, 2001). In the Western Cape most people consider themselves to be Coloured with 53.9% indicating they are Coloured, 26.7% indicating Black, and 18.4% seeing themselves as White (Statistics South Africa, 2006). Yet, even though they seem to be the largest population group in the Western Cape, my literature review yielded very little

articles tackling the issues that concern Coloured families and no articles were found that described the daily life and daily routines of this cultural group. Thus, the focus in this study was on families who identified themselves as being Coloured.

There is great contention about what exactly the concept “Coloured Identity” refers to. The identity was created and shaped by South Africa’s history of segregation and Apartheid. People belonging to this racial category were seen as a racial mix or genetic hybrid, which originated during colonialism through the sexual encounters of Dutch and British colonists with slaves from India and East Africa, and the indigenous Khoi and San people of the Cape (Erasmus, cited in Louw, 2010). However, the sociologist Zimitri Erasmus (cited in Louw, 2010) adds that Coloured identity is a creolised construction with “detailed bodies of knowledge, specific cultural practices, memories, rituals and modes of being” (p. 1). For a more comprehensive definition of the term and an extensive bibliography, see *Coloured identity: South Africa (A select bibliography)* by Alegra Louw (2010).

All of these families reside in a Northern suburb of Cape Town. The inclusion criteria for the study were as follows:

- (1) The oldest child in the family had to be between one and four years of age because most resilient families going through this transition regain stability after four years (Olson & Gorall, 2003).
- (2) The participants’ first language had to be either English or Afrikaans.
- (3) Both parents had to be able to take part in the study.
- (4) Both the biological mother and biological father taking part in the study had to be cohabiting with each other and their child (but were not required to be married).



Participants were recruited and interviewed until saturation of results was reached. According to Guest, Bunce and Johnson (2006), saturation of themes in qualitative analysis typically happens within the first twelve interviews from a homogeneous sample and, at times, in as little as six. Consistent with this finding, saturation of results in this study was reached after ten families were interviewed.

In this study, convenience and snowball sampling were used. Participants were recruited from two day-care centres located in the Northern suburbs of Cape Town. The day-care centres were contacted and fully informed of the research project during a face-to-face meeting. The principal teacher at each centre received a copy of a document containing relevant information about the research project (see Addendum A). After the necessary information had been provided, these gatekeepers were asked whether they would help identify and recruit potential participants for the study. These teachers then each contacted the governing body of the centres, asking permission to be involved. Both governing bodies agreed.

The principal teacher then informed potential participants of the study, using the document shown in Addendum A. Interested parents gave their names and contact details to the teachers and they then passed it on to me (the researcher). The first day-care centre had a total of 81 children (38 girls and 43 boys) enrolled in the year of data collection (2010). The children's ages ranged from one to six years. Of the 81 children, two came from non-South African families (one family was from Angola and the other from Nigeria), one child was Xhosa speaking and the rest ( $n = 78$ ) were identified by the teacher as Coloured. None were considered to be White or Indian. In terms of language, all the children identified as Coloured were English speaking. The centre provided the names and contact numbers of nine interested parents that they believed met the inclusion criteria. Many families were excluded because their oldest child was older than four. Two of the other families could not be reached by

phone after multiple attempts. One family declined to take part in the study after phone contact was made because both parents worked long hours, travelled a lot and thus found it difficult to find a time when both partners were available. Thus, six families from this day-care centre were interviewed.

The second day-care centre had 42 children (28 male and 14 female) enrolled in the year of data collection (2010). The ages ranged from one to five years. Of the 42 children, two were from the Republic of Congo, none of the children were considered to be White or Indian by the teacher, one was Black, and 39 were Coloured. All of the children identified as Coloured were English speaking, but parents were recognised as being bilingual, speaking both English and Afrikaans. The centre provided me with the names and contact details of eight interested families. Only four of these families were interviewed because saturation of results was reached.

### 3.3. Participants

The demographic variables of the participants in this study were as follows: all 10 families could understand both English and Afrikaans. In terms of home language, three families reported it to be Afrikaans, four reported it to be English, and three families reported both as home languages. The husbands' ages ranged from 27 to 41 years, with a mean age of 33.1 ( $SD = 5.2$ ) and (except for two couples who had the same age) were mostly older than their wives, whose ages ranged from 21 to 35 with a mean age of 28.8 ( $SD = 5.0$ ). The biggest age gap between husband and wife was 16 years, with a mean difference of 5.2 years ( $SD = 4.9$ ). Seven couples had one child (all of them males except for one), and two couples had two children each (also all males). The remaining couple had three children, of which the oldest two were twins (both males) and their youngest was a girl. Thus, out of the 13 children only two were female. The ages of the firstborns ranged from two to 4.4 years, with a mean age of

3.6 years ( $SD = 0.5$ ). Most parents had been in a relationship with each other for at least a couple of years, stretching from four to 14 years, with a mean of 7.8 years ( $SD = 3.2$ ). In terms of highest level of education obtained, six of the couples indicated that both partners completed high school and two of the couples indicated that both partners obtained diplomas. For the remaining two couples, both males had completed high school, while one of the wives had obtained a degree and the other a diploma. All the participants who were employed were employed on a permanent basis. One husband and two wives were unemployed at the time of the interview. This was because of health problems as well as cutbacks at their companies. The husbands' occupations included support manager, operation manager, paramedic, surveyor, panel beater, detective, driver and clerk. Two husbands were self-employed. The employed wives ( $n = 8$ ) mostly worked as administrators and clerks, but the list also included a work coordinator, a cashier, a dental technician and a nurse. At the time of the interviews, five of the ten couples lived with extended family (usually the parents of one of the partners) and, in these cases, none of these couples were the home owners. In terms of family monthly income, one couple earned more than R30 000 a month, four earned between R10 000 and R 20 000 a month, four earned between R5 000 and R10 000, and one family earned less than R5000. The Bureau of Market Research (BMR) at the University of South Africa uses six income categories to distinguish between the total household income (per annum) of South Africans: R0 to R50 000; R50 000 to R100 000; R100 000 to R300 000; R300 000 to R500 000; R500 000 to R750 000; and R750 000 or more (Masemola, Van Aardt & Coetzee, 2010). Of the 13 654 416 million households in South Africa in 2009, 12% fell in the second lowest category (R50 000 to R100 000) and 28% fell in the middle income category (R100 000 to R300 000) (Masemola et al., 2010). Thus, it seems that eight out of the 10 families from this sample fell in these two categories (R60 000 to R240 000).

### 3.4. Data Collection Procedure

During the telephonic contact a face-to-face meeting was scheduled with the couple in order to conduct the interview. Most couples preferred to be interviewed at their homes, except for one couple who preferred to be interviewed after hours in an office at the first day-care centre. During the meetings, the couples were first asked whether they preferred English or Afrikaans and were then provided with a standard written consent form (see Addendum B) in the language of their choice. This document briefly explained what the research study entailed, the focus of the study, the procedure that would be followed, the rights of the participants, my contact details, the contact details of my research supervisor, the contact details of the Division of Research Development at the University of Stellenbosch, and the particulars of the compensation (a R50 voucher, a small story book for the child, and cookies for the family as a token of appreciation). The document was discussed thoroughly. The parents were assured that their right to privacy would be upheld and that personal information that increased their risk of being identified by people other than the researcher would be kept confidential. It was also made clear that participation was voluntary and based on informed consent. All the couples were informed that they could resign from the study at any point and for any reason without suffering any consequences. The parents were then given time to ask questions and raise any potential concerns. No concerns were raised. After this, they were asked to sign the consent forms if they still agreed to take part in the study. All the couples agreed and signed the form. Each couple was given a copy of the consent form. After these procedures, one of the parents filled in a biographical questionnaire (see Addendum C), after which we proceeded with the interview. The interviews were tape recorded and none of the families objected to this, or seemed uncomfortable with it.

### 3.5. Interview Schedule

Data was gathered by conducting a semi-structured interview (see Addendum D) with both parents. Weisner (2002b) developed the *Ecocultural Family Interview*, which assesses many aspects of family routines, and some of these questions were appropriate and adapted to fit the requirements of this study. The interview was separated into two parts. The first focused on a typical week day and the second focused on typical weekend activities. A week day was divided into six different time frames. Parents were asked to describe the activities they usually engaged in during those times. It was felt that probing about different time frames during a day would produce more detail than merely asking them to describe their daily routines. Furthermore, because the word *routine* is so difficult to define, it could not be assumed that all the families had the same understanding of the construct as the one described in this study. In this study, family routines are all the recurring, patterned activities that family members engage in during a daily or weekly cycle. Using the words *family routines* during the interview could have excluded some activities if the family did not view these as routines. Thus, it was stressed that they should not only describe routines, but any typical and recurring activities. In relation to each time frame, the following questions were also asked to gain a better understanding of these patterned family activities:

- How does the activity unfold?
- Who is involved in the activity?
- Why are these activities important to you?
- What is the goal with these activities?
- What would the consequences be if you did not do these activities?
- How did you come up with these routine activities?
- What concerns you about these routine activities?
- How do you manage to keep these routine activities going?

- Do you think this routine works for your family?
- Which activities are you trying to encourage, and why?
- Which activities are you trying to change, and why?
- How has the arrival of your child/children changed the routines you used to follow during this time of day?
- If one looks at this time of day, what changes have you made to your old routine in order to adapt to the arrival of your child?

These probes were designed to assess the value the specific routine holds for the participants; why it is important to them; to discern what challenges the participants face in sustaining their daily routines; to assess what helps families maintain their routines; and to gain an understanding of the accommodations/changes families have made to their routines after the arrival of their first child. It was felt that these questions had to be asked for each time frame, because different family routines, engaged in at different times of the day, may generate different answers to these questions (e.g. grooming routines may not pose the same challenges as TV-watching routines).

The next part of the interview, which focused on a typical weekend, followed the same structure as the first part. However, rather than just one day, it focused on different time frames over the weekend as a whole, thus focusing on Friday evening, Saturday morning, Saturday afternoon, Saturday evening, Sunday morning, Sunday afternoon, and Sunday evening.

This interview schedule was provisional. The first interview was seen as a pilot in terms of how well the interview schedule worked. Amendments were made after the first interview. One of these amendments was that probes one and two (*How does the activity unfold?* and

*Who is involved in the activity?*) seemed mostly unnecessary, as the family usually discussed these features spontaneously. These probes were only used when this information was not elicited by the overarching question. Secondly, the interview process seemed to become rather tedious and long for the parents by the time we reached the discussion of weekend activities (answers became shorter, body language seemed restless, and parents seemed more distracted by other stimuli in the room). This second half was usually reached after 60 minutes of discussion. The children also became more demanding during this time. I felt that probing in relation to each weekend time frame would take too long. Thus, I asked them to describe their weekend as a whole, making sure they focused on activities in each time frame. After their global assessment of the weekend, I used the probing questions only in relation to events that stood out.

### 3.6. Data Analysis Procedures

The audio recordings were transcribed by me (the researcher) verbatim to encourage engagement with the data (Henning, 2007). Very wide margins were left on either side for writing codes. Initially, line-by-line coding was employed (Charmaz, 2008). Thus, each line of written text was studied to ensure that the analysis was built from the data itself, and to avoid it being clouded (as far as possible) by my prior theoretical knowledge, my own motives, or my personal biases (Charmaz, 2008). One challenge during the analysis was my lack of practical experience in qualitative coding techniques. To overcome this hurdle, I initially employed the micro-analytic techniques described by Corbin and Strauss (2008). While coding the first transcribed interview, I used questions such as where, what, how, when, who, and with what consequences (Charmaz, 2008; Corbin & Strauss, 2008). I also utilised some of the other suggested techniques, thus making use of constant comparison, analysing the various meanings of some words, comparing the situations with my own personal experience (and asking: *how is this situation different or similar to my own?*),

looking at emotions that were expressed and the situations that aroused them, looking for words that indicate time and process, asking questions like “so what” and “what if”, and asking theoretical questions that pointed to the connections between concepts (Charmaz, 2008; Corbin & Strauss, 2008). These techniques ensured that codes did not generate a thin description, or remain at a superficial analytic level (Henning, 2007), but encouraged in-depth understanding and theory production (Corbin & Strauss, 2008). During the first interview I also wrote multiple possible codes for units of meaning. This helped me gain my footing and experience in coding. I followed the same procedures during interviews two and three. By the third interview I was able to write codes that fit the data more accurately. I then returned to my first two interviews and looked at the codes again, discarding those that did not represent the data well (e.g. where they were either too simplistic, or too far removed from the data). I also recognised additional codes that I had missed earlier, and further developed the terminology of previous codes, making them more accurate. I then proceeded to code the rest of the interviews.

Although not initially part of the plan, a literal cut and paste method was used to sort through the codes and relevant quotations, as this was felt to be the best procedure to support my lack of experience with qualitative analysis. This technique has also been used in a similar study by Maul and Singer (2009), who analysed the accommodations families made in their daily routines to positively adapt to their children with developmental disabilities. Through manual manipulation, activity-specific codes were grouped together (e.g. all codes related to morning routines were put together and, similarly, all codes related to bedtime routines were clustered). Furthermore, within each activity category (e.g. morning routines) there seemed to be codes that were related, or similar to each other, and these were further clustered (e.g. all codes related to feeling rushed in the morning were grouped together and, in contrast, all codes related to struggling with transport in the morning were clustered). These clusters



became the initial themes of the analysis. Codes were written in colour. A different colour was assigned to each family, which helped to identify which family stressed certain themes more than others, and which themes were significant across the entire sample of families. The visual representation also facilitated the identification of themes that were routine specific and themes that cut across all family routines. This process was further supported by constantly writing notes and memos on potential codes, themes and categories (Charmaz, 2008; Corbin & Strauss, 2008; Strauss & Corbin, 1990).

Axial coding was employed to delineate the connections between major themes. When there were connections between themes, the themes were clustered together to form sub-categories. When there were sub-categories that were related, they were further grouped together to form overarching categories (Charmaz, 2008; Strauss & Corbin, 1990). These categories and sub-categories were also specifically related to each of the five research questions and looked at which themes answered which research questions best.

With these significant themes, sub-categories and categories in mind, I looked at the data afresh and proceeded with focussed coding (Charmaz, 2008). This phase of coding was more “direct, selective and conceptual” than the first phases (Charmaz, 2008, p. 96). During all the levels of the analytic process, methods of comparison were used constantly to compare data, codes and categories within and between transcripts in order to identify similarities and differences (Charmaz, 2008).

In essence, the analytic process was very intensive and in depth. The analysis took four to five months, during which the data was analysed and reanalysed. Although I initially had little experience, the methods employed were rigorous to ensure precision. The grounded

theory techniques chosen for this study helped to identify new concepts and processes related to family routines.

### 3.7. Trustworthiness

This study made use of the criteria set forth by Lincoln and Guba (1985) to address the soundness of the research methodology. Lincoln and Guba (1985) stress that attention must be paid to *trustworthiness*, which consists of four categories: credibility (assurance in the ‘truth’ of results), transferability (demonstrating that the results are relevant for other contexts), dependability (ensuring that the analysis is consistent), and confirmability (showing that the generated theory is based on the reality of the participants and is not the result of researcher bias).

In terms of credibility, Lincoln and Guba (1985) recommend prolonged engagement in the field. Data collection during this study took place over a period of nine months. This increased the likelihood of gaining a better understanding of the culture and all the dynamics involved within the families and community (Lincoln & Guba, 1985). Also, the families were contacted on multiple occasions (at least two to four times). This left time for rapport and trust to develop. It seemed that participating in the study was a positive event for many participants. During the interview process, many couples commented on how much they enjoyed the interview and research experience. Furthermore, multiple contact sessions with the principal teachers also helped in gaining a deeper understanding of the families in the community. To further establish credibility of findings, member checks were conducted. After analysis, a brief synopsis was prepared describing the major findings and themes concerning each research question. Three families were contacted and invited to review the synopsis. The results were explained and then informally discussed with the couples. The parents were asked to give feedback regarding the accuracy of the results and whether they

felt that the results represented their family situation well. This was done to ensure that the conclusions drawn from the research represented the reality of the participants and respected their voices. All three families seemed satisfied with the results, and two parents emphasised that they felt the topic of family routines was interesting and that the research process had helped them to look at their family life in more detail, putting a taken for granted topic in the spotlight. Finally, to increase credibility, data analysis focused specifically on potential rival conclusions and direct attention was paid to instances that contradicted the theoretical analysis (Lincoln & Guba, 1985).

In terms of transferability, I focused on giving a thick description of the research results (Lincoln & Guba, 1985). This detail helps readers see the extent to which these situations are similar and dissimilar to other situations, and thus whether the conclusions drawn from the study can be applied to other contexts (Lincoln & Guba, 1985).

In terms of confirmability, Yardley (2008) suggests that researchers should leave evidence linking the raw data to their final manuscript, because this assures readers that the research was conducted in a professional and cautious manner. Memos of the analysis are available on request, as well as photos taken during the cut-and-paste procedures so that one can see the physical manipulation of the raw data and the codes into themes. Continuous discussion with my research supervisor about the research process, data analysis procedures and results was another method used to ensure that researcher bias was reduced.

A crucial part of establishing trustworthiness is reflexivity (Lincoln & Guba, 1985; Yardley, 2008). As the researcher is the main instrument in qualitative research, I have taken care to reflect on how I affect the research process, and have also taken care to disclose relevant information about my personal, academic and theoretical background that may have informed

or influenced the researcher-participant relationship during data collection and the subsequent interpretation of that data. Thus, I have already admitted my lack of experience in qualitative analysis, but also what steps I put in place to address this. In terms of cultural differences that could have limited the study, I have a different cultural background to and come from a different area than the research participants. I am also not a parent. This might have limited the study in that a parent or a person from the same community and cultural background could have insights that I might have missed. On the other hand, this difference also helped the analysis in that I could easily compare these parents' lives with that of my own, which highlighted what was unique to their situation.

### 3.8. Ethical Considerations

Ethical clearance was granted by the Stellenbosch Research Ethics Committee, Division for Research and Innovation on 9 April 2010. Throughout the entire data collection and data analysis process, as well as in the final reporting of the research results, confidentiality was upheld, and thus no identifying information about the respondents was available to anyone except me (the researcher). All precautions were taken to store the information safely and privately. The dignity and rights of the respondents were not hindered. Participation was voluntary and the respondents were fully informed of the research objectives and procedures, thus no participant was misled in this study. The participants remained free to withdraw without suffering any adverse consequences. No participant withdrew from the study.

### 3.9 Conclusion

Chapter 3 presented the methodology employed in this research study. This qualitative grounded theory research design was specifically chosen because it was believed that it would answer the research questions best. In this chapter, I presented the reasons why I thought this design would fit the research questions and aims well. A description was also

given of the participants, followed by an explanation of the sampling, data collection, interview, and analytic procedures. Finally, I discussed the various ethical safeguards that were put in place and what methods were used to strengthen the trustworthiness of the results. The next chapter will focus on the research results.

## CHAPTER FOUR

### RESULTS

This chapter presents the major themes and sub-themes that were found during the data analysis to be significant. These themes and sub-themes concern family routines in the lives of first-time parents. The chapter is divided into five sections. Each section focuses on one of the five research questions directing the study. Thus, the first section focuses on what family routines look like in the lives of first-time parents. Section two looks at why these family routines are important to first-time parents. Section three discusses what challenges first-time parents face in sustaining their daily routines. Section four presents themes relating to what factors assist first-time parents in maintaining their family routines. Finally, section five discusses all the common as well as idiosyncratic accommodations first-time parents make to their daily routines in order to adapt to the arrival of their first child.

#### 4.1 Themes Related to What Family Routines Look Like in the Lives of First-time Parents

The first research question was: *What do family routines look like in the lives of first-time parents?* During the coding process it became evident that this question could be answered in two ways: to describe what family routines look like by identifying common processes, or to describe what family routines look like by identifying the typical family routines first-time parents engage in. When looking at process, it means that the results do not merely identify and describe the common daily activities of families (e.g. identifying bathing as one of the typical routines and then describing it). When looking at processes it means that one analyses the general characteristics present in all or most family routines. This type of analysis revealed aspects of the design of these routines and how families structure these routines so that they fit into a day. It also showed how first-time parents typically progress through these routines as the day unfolds. As this research study is not a descriptive study, but a grounded

theory study (which is specifically designed to delineate process), the specific types of routines are not presented in this thesis, as this would distract the reader from the focus of the research.

By focusing on process, the analysis generated three significant overarching themes that were closely related to each other. The first was that, in the lives of first-time parents, family routines fit into a day as a *sequence of unfolding activities that are situated within a temporal structure*. It is clear that this overarching theme has two components and that it can be divided into two sub-themes, namely *sequential unfolding of activities in a set pattern* and the existence of a *temporal structure around activities*. These two sub-themes are, however, inextricably linked, as the one does not seem to exist without the other (discussed below). The second overarching theme was that *the specific sequence and temporal structure are designed to be functional: “it works for us”*. The third overarching theme seemed to contradict the second theme and related to the parents’ sense of *temporal incongruence*. These three overarching themes and the two sub-themes are presented in Table 4.1.

Table 4.1

*Major Themes Related to What Family Routines Look Like in the Lives of First-time Parents*

Major themes	Sub-themes
Sequential unfolding of activities that are situated within a temporal structure.	a. Sequential unfolding of activities in a set pattern. b. Temporal structure around activities.
Specific sequence and temporal structure is designed to be functional: “It works for us”.	
Temporal incongruence	

Each of these three overarching themes and respective sub-themes themes listed in Table 4.1 will be elaborated on further, and various excerpts from the interviews will be used to substantiate the findings. It is important to note that these three themes are interrelated, but also set the tone for the sections that follow. They give the background to the arguments in Sections 4.3, 4.4 and 4.5. Thus, these themes shed more light on what challenges first-time parents face in sustaining their daily routines, what factors help first-time parents maintain their daily routines, and what accommodations first-time parents make to positively adapt to the arrival of their child.

#### 4.1.1. Sequential unfolding of activities that are situated within a temporal structure

As mentioned earlier, the first overarching theme, namely *the sequential unfolding of activities that are situated within a temporal structure*, has two sub-themes: the *sequential unfolding of activities in a set pattern*, and the existence of a *temporal structure around these activities*. However, these two sub-themes are difficult to describe separately, as they are interlinked with each other. These two sub-themes will thus be discussed together and substantiated by quotes throughout this section.

*Temporal structure* is a newly created concept. It is comparable to the words *time schedule* or *timetable*. The reason for the development of this concept, rather than using the words *time schedule* or *timetable*, was because a timetable or time schedule is already a concept on its own and is not always related to the family daily Routine. What I want to point out by using *temporal structure* is that I believe it is one of two components that make up the family daily Routine construct. One of the components that make up this daily Routine is that it consists of a sequence of individual activities/routines, where one routine follows another in an established pattern (hence the theme *sequential unfolding of activities in a set pattern*). The second component is this temporal structure, which means that every individual



activity/routine must take place at a certain time and must be completed by a certain time in order for the rest of the routines in the sequence to happen successfully. Thus, the family has built a time structure into their sequence so that they get through the day relatively comfortably.

Throughout all the interviews, the families' descriptions of the day always followed a familiar format, with parents saying: "First we start to do this, then that, then I will do this while he/she does that, then at that time we do that and that, and this is the time we need to be done with these tasks." This format is illustrated by the following excerpt:

We wake up at half past five at the latest [...] and then I would collect the clothes, iron the clothes, [my husband] will get into the shower so long. When I'm done with the ironing, I will get into the shower, I will then get dressed, pack lunch, and then [my husband] will dress [our son] while [our son] is still sleeping. And we leave the house at ten past six. [F1]

Note from the excerpt that one task follows another in a set pattern, and there is a distinct start to the sequence (half past five when they wake up) and an end to it (when they leave the house at ten past six). Note the words "when I am done", indicating that the one activity is completed before the next one begins. Also note the recurring use of the word *then*, indicating succession and a movement from the one activity to the next. The word *then* is also synonymous with the word *afterwards*, implying that the activity before is completed before the next one commences. Furthermore, the word *then* also places the activity along the dimension of time. This same pattern can be seen in the following example of a morning sequence described by family four. Note how time plays a key role in the description, as there is not only a start and end to the sequence, but also specific times and time limits to each of the individual routine activities:

Quarter past six is my time to oversleep. Half past six is porridge time. Quarter to seven, they're awake. By seven o'clock they're dressed. Between seven and quarter past seven we obviously making ourselves pretty, brushing our teeth and that's fine cause then we are all done. He [partner] gets up. And then he obviously fixes everything else. So everything has a time and location for us in the morning. [F4]

From the parents' descriptions it is evident that one family activity follows another in a set sequence, or pattern. Time is also an integral part of how these routines are designed by the family, but furthermore it plays a key role in the *experience* of routines: Family members are aware of time, time limits, and the passing of time as these activities unfold throughout the day. It follows that family routines are not always experienced as isolated pockets of meaning, suspended moments in time confined only to that particular type of routine (e.g. a bathing routine), but that there is an acute awareness of the sequence of unfolding events and activities within a specific temporal structure.

4.1.2. Specific sequence and temporal structure is designed to be functional: "It works for us"

This theme illustrates the importance of the design of the family's activity sequence, as well as the importance of the temporal structure. Family members design these sequences and the temporal structure so that they are functional for them. Although all the families mentioned that they desire certain changes to their routines (discussed in Section 4.1.3), they still felt that their sequence of routines worked well for them. One father of two boys stated:

Ons is al so aangepas by daai Roetine. Uh, ek dink nie iets anders gaan vir ons werk: om later op te staan of ander dingetjies te doen. Ons is al so in daai Roetine en dit pas ons goed. En uh, en dit werk vir ons. [F1]

Note his insistence that any change in activity (“ander dingetjies doen”) or change in temporal sequence (“later op staan”) will not be as functional for the family. His wife agrees that this sequence also suits her best. Rather than sleep late, she prefers to get up early with her husband, who wakes up at 5 o’clock, in order to accomplish some domestic tasks and child-care duties. She explains:

Uh, soggens werk nogal vir my altans om te stryk en broodjies in te sit en om daai tyd wakker te wees. En dat ek wakker is vir [my kind] ook. Ek bedoel, vir my *werk* dit. As om nog verder aan te slaap of even om saans te stryk, om saans brood in te sit. Dit gaan net nie vir my werk nie. So dan is ek wakker. En vir [my man] om daai tyd op te staan werk ook maar in my guns ook. So dan weet ek: hy is op, ek is op. [F1]

She stresses that any change in the timing of the routines, or restructuring the order of these routines (doing the activities before going to bed at night, rather than in the morning), will not be functional. One father also felt that their sequence suited their family despite the fact that he and his wife would have liked to engage in more religious activities in the mornings:

Ja, ek dink nie daar is iets anders wat ‘n mens kan (behalwe nou die, die godsdiens) wat ‘n mens kan byvoeg daar nie. En daar is niks wat jy kan weg neem ook nie. So ja, ek sou sê dit werk vir ons. [F2]

This father’s choice of words is interesting to note, since he uses the word *can* (“kan”) rather than *want*. Thus, he feels that there is nothing else they *can* add or remove, rather than saying there is nothing they *want* to add or remove. This might point to a more reactive functionality, in that they have designed this set of routines to be functional in relation to their current circumstances. Furthermore, it was evident from many parents that there was a sense that one activity has a ripple effect on the rest of the activities in the chain. When asked

whether she would like to change anything in their morning routine, one mother commented: “Op die huidige oomblik nie eintlik nie, want, soos ek gesê het, alles het ’n effek, so, soos dit nou is werk dit” [F4]. Note her emphasis that all the activities have an *effect*. The parents insisted on this cause and effect element by explaining that, when they do not adhere to their time schedules, it has negative consequences for the subsequent activities in the sequence:

Jy weet al dis die tyd wat jy opstaan, dis die tyd wat jy moet stort, dis die tyd wat jy moet uit wees, dis die tyd wat jy by die deur moet uit wees. Verstaan? So, as jy nie daarby hou nie, dan verloor jy jou lift, of jy kom laat by die werk, of... [F4]

[The Routine is] to, how can I say, get happily through the day. You know? So no stress because if I’m going to be late it’s going to ruin everything. I’m going to make [my husband] late, I’m going to make my son late and it’s not going to work. [F8]

Thus, their temporal design is structured in such a way that it ensures all the routines in the sequence are completed well and on time. Adding an activity to the sequence will also necessitate that the family make major changes in the temporal structure of their routines. So, if a family wanted to add a family breakfast routine in the morning, they would have to redesign what time they had to get up in the morning and what time they thus had to go to bed the previous night. This kind of sequence and temporal restructuring was often not a desirable option:

If we were to have breakfast together as a family we will have to get up earlier and that is something that we’re not willing to do at this point. Because, like, [the morning is] really, thirty minutes. There’s not a lot to get done but we have to, otherwise we’re going to have to go to bed earlier to wake up earlier and it won’t work. [...] I would love to spend some

time in the morning with my husband or with my son but at this point it's just going to mess things up. [F6]

This excerpt points out that, even though the family desires more relational connection, their circumstances do not allow it and they have designed their sequence of routines to be functional in relation to their current life situation. Thus, the routine is functional, but it is a more reactive functionality. They do not have complete free reign in terms of design, but they make it work in spite of the obstacles. Additionally, parents often used the words “throw out” when describing how the entire Routine is derailed if one activity in the sequence does not go according to plan. For example, when her children do not stick to designated sleeping times, one mother commented: “dit gooi jou hele Roetine omver”. This same mother explained what happened when she was not able to prepare dinner in advance, the night before:

Ek meen as ek nou moet vyfuur van die crèche af stap, jy kom half ses by die huis, om nou nog vleis op te sit, verstaan jy, dan eet ons later en dan gooi dit al die Roetine uit want dan, hulle gaan later slaap en ek hou nie daarvan hulle moet laat eet nie. [F9]

In conclusion, the families insisted that they had structured their routines with this specific sequence and temporal structure so that it was more or less functional for them at this juncture in their life cycle. This functionality can be chosen proactively, but also seems to be reactive in terms of the family's circumstances. The functionality is also evident because, when the sequence does not go as planned (like the presence of an additional activity, a disruption in the completion of a specific activity, or failure to adhere to time limits), it has negative consequences for the rest of the activities in the sequence.

#### 4.1.3 Temporal Incongruence

“Daar’s nie meer tyd nie. Daar is nie meer tyd nie.” These words echoed throughout all of the interviews and seem rather contrary to the theme above. Even though the parents insisted that their sequences of routines worked for them, all of the parents described situations that related to temporal incongruence. *Temporal incongruence* is also a newly created term and means that there is a discrepancy between the multiple routines first-time parents want to engage in, and the time they have available in order to do them – thus incongruence between the family’s current sequence of routines with its temporal structure, and the family’s ideal sequence of routines and its temporal structure. The parents often said that they had a need for more family time, as with this next mother when she was asked what concerns her about her evening routines: “Uh, ja, time actually. It’s like, I don’t know. Like I said, everything must be done, even at night-time it also must be, but it just seems that at night there is not enough time” [F4]. She later reiterates: “If there was more time at night it would be a great help.” It is also evident that when family members do interact, these moments sometimes “feel a bit rushed”, as one father, from the family interviewed first, observed. Furthermore, some families specifically mentioned various routines that they would like to have, but these meaningful activities take a back seat because of time restrictions. The same father who stated that his mornings felt rushed, also emphasised this point:

Ja. Vir my uh, ek sal, sal dit meer waardeer het as ons miskien meer tyd kan gespandeer het in die oggend, saam ontbyt kon geëet het. Maar tyd laat ons nie toe om sulke dingetjies te doen nie en dis daai klein dingetjies wat jou, wat jy eindlik *wil* hê in die lewe, maar jy kan dit ongelukkig nie kry nie. [...] Ja, in die oggende, ons groet mekaar as, as ons waai. So in die oggende dan groet ek [my vrou] as ek uit gaan dan groet ek [my seun] as hy wakker is. Maar dit gaan so gou. Soos ek jou sê is, jy weet al: dis die tyd wat

jy opstaan, dis die tyd wat jy moet stort, dis die tyd wat jy moet uit wees, dis die tyd wat jy by die deur moet uit wees. [F1]

From this excerpt one can see that this father desires more shared family time because, for him, this is his priority in life (“dis daai klein dingetjies wat jou, wat jy eintlik wil hê in die lewe”). However, because of work responsibilities and having such a tight schedule in the morning, there simply is not enough time to fit a breakfast routine into their sequence of routines. Another family spoke about the need to engage in more religious activities in the mornings. The next excerpt shows this father’s worry and concern because of a lack of time to do Bible study and pray:

Ek sal sê wat kortkom daar is, uhm, is omdat ons Christene is, soos ek nou gesê het, daar is nie tyd om jou daaglikse stukkies brood (nou nie brood soos in brood eet nie) te voed vir jou vir die dag nie. En dit is wat mens altyd so bekommer is. [F2]

His wife also expressed her concerns about the fact that they did not have enough time in the morning to engage in this meaningful activity:

Ek het nou seker so ’n maand gelede, ek het een oggend in ’n ongeluk gesit en daai oggend sê ek vir myself: “net omdat jy nie gevra het, ‘Here dra my’”. Omdat ek weet ek ry met ’n taxi werk toe en ek weet hulle is, as hulle nie lisense het nie, dan ry hulle sonder permits of whatever. En daai oggend toe besef ek: alles doen jy so haastig dat jy, amper sê ek, jy’t nie nog *tyd* om te bid nie. Dan as jy by die werk kom, *nou* wil jy bid. En nee, dis ’n bietjie te laat, want by die werk moet jy ook kan kom. [F2]

This excerpt shows the family’s perception of the gravity of this temporal incongruence, because they consider the absence of this activity to affect personal safety. Note also that the

order of the sequence of routines is of concern here, because it is not ideal if this routine is completed at work. For this couple it rather should happen before they leave the house. Note that the morning routines are also experienced as rushed (“alles doen jy so haastig”).

Because of strict temporal limits (24 hours a day), there is simply not enough time to fit in everything the family needs and wants to do. Thus, some activities (such as work-related duties) have to take precedence over others, necessitating the family to relinquish meaningful family routines. In conclusion, temporal incongruence was a significant concern for first-time parents. It can be expected that an increase in any of the extra-familial and intra-familial challenges (discussed in Section 4.3.1) can lead to an increase in temporal incongruence.

#### 4.2. Themes Related to Why these Routines are Important to First-time Parents

The second research question directing the study was: *Why are these routines important to first-time parents?* Specific patterns from the data that relate well to this question were clustered into two overarching themes. The first was that a *family routine is a chance to spend time together: family time*. The second was that it is *a setting for ensuring child development*. Both of these overarching themes also had two prominent sub-themes. When it came to the first overarching theme, the two sub-themes were: *time together gives meaning to life* as well as *time together fosters connection*. The second overarching theme could be broken down into: *developing children to be routinised* as well as *developing specific competencies and values*. Sometimes these themes were difficult to separate from one another. This is because parents often try to accomplish multiple goals during a routine, including development goals and building family connection goals. The overarching themes and sub-themes are presented in Table 4.2. Each of these themes is discussed in the sections that follow.



Table 4.2

*Major Themes and Sub-themes Relating to Why These Routines are Important to First-time Parents*

Major overarching themes	Sub-themes
A family routine is a chance to spend time together: family time	<ul style="list-style-type: none"> <li>a. Time together fosters connection</li> <li>b. Time together gives meaning to life</li> </ul>
A setting for ensuring child development	<ul style="list-style-type: none"> <li>a. Developing children to be more routinised</li> <li>b. Developing other specific competencies and values</li> </ul>

#### 4.2.2 A family routine is a chance to spend time together: family time

##### 4.2.2.1 Time together fosters connection.

Because family routines create settings in which family members can interact with each other while performing various activities, it allows time for family members to foster deeper connections with each other. The development and maintenance of these relational connections ensures that the unit stays together in the long run, especially when the routine creates the chance for partners to communicate with each other, ensuring that they do not drift apart. Spending time together within these settings also ensures that parents build loving and caring relations with their children and thus experience a sense of belonging and care within the family unit. Thus, the development and maintenance of relational connections happens on various systemic levels within the family: within the family unit as a whole, within parent-child dyads, and within the couple unit.

#### 4.2.1.1.1 The family unit as a whole

A few parents mentioned that they thought a specific routine was important because “it [kept] the bond, the family bond”. When asked why a dinner-cooking routine was important to them, one father stated:

I want my marriage and my family to work and I will do everything to keep my family together and to keep me working on my family. So for us, that's, I'm saying for me it's very important to be... family relation is very important. You will hear that I always talk, refer to our family spending quality time, family this, family that, wherever we go: family. [F7]

Thus, besides the primary goal of cooking dinner together, this cooking routine allows the family to spend time together and is a space in which parents can “work” on their marriage and the family as a unit. This is where the family can have a chance to build connections and it helps them to “keep” the “family together” and ensures the unit’s long-term survival. Similarly, eating dinner together in front of the television was also seen by another family as an opportunity to foster healthy relationships. When asked what the goal was with their dinner routine, this father stated: “To spend family time, quality time.” His wife elaborated:

Even that little time, we must make use of it because at the end of the day if we’re just going like, if I must just eat on my own and then me and [my son] go sleep and we just don’t wait for [my husband], at the end of the day we’re just living past one another. So I think we must just still make use of, even if it’s just an hour, we must still make use of the time. [F6]

When talking about what they thought the consequences would be if they did not have this family routine, the mother commented: “Then I think that we won’t be a family anymore.

We'll just be the mother and the father. We're not really a family." In other words, shared family routines build connections, and without family interactions there would only be disjointed individuals. Family routines make the symbolic idea of *family* into a concrete, visible reality.

#### 4.2.1.1.2 Parent-child connections

All the couples mentioned at some point that a particular routine or routines was important to them because it allowed them time to form a connection with their young child: "It is important because it shows [our child] that we care and we are there. Basically it's some kind of comfort as well" [F3]. Parents often spoke about cooking routines, television watching routines, playing routines, cleaning routines, brushing teeth routines, grooming routines, baking routines, eating breakfast routines, visiting extended family routines, going to the shop routines, weekend outing routines and walking routines, which were seen as special moments in which a parent and child could bond. This is what some mothers said about their evening routines:

Ek hou daarvan om die kinders altyd self te bad. Dis daai band wat jy nouer kry om jou kinders te bad, daai bietjie, ek is heeldag nie by hulle nie, so ek kan darem ten minste vir hulle bad en kans kry, tyd kry om te speel met die kinders, want dis vir my baie belangrik. Ek sal vir hulle oor en oor ook sê: "You know Mommy loves you." So hulle weet hulle ouers is lief vir hulle en ek dink daar is so min liefde in hierdie lewe vandag. [F9]

The important part is, because it allows for [my son] to feel that, that, we missed him and that. It's just, I don't know, for me it's basically, it's family time. So that he knows that he belongs here and it's not all about crèche. [F5]

Thus, routines are seen as significant because they allow a chance for parents to communicate with their children and create a sense of comfort and belonging in their children. Three fathers compared their current family environments with their own unpleasant childhoods. For these fathers, their current family routines were seen as settings in which they could specifically create a more positive bond with their children, as opposed to what they themselves experienced as children. One of these fathers stated: “For me there is tenants from my earlier days. I can’t remember my father ever played with me, so I want to make that part of his life. So that: ‘I know he is there’ and stuff like that” [F3].

Another father expressed this type of importance about their evening routines:

I had a difficult relationship with my dad. He never really sat down and spoke and, you know. And I always told myself it was quite difficult. And you get to that stage where you feel that you need that in your life. And my dad wasn’t around. So I told myself that I wouldn’t like the same for [my son]. Cause every day, there is not a day that goes by that I don’t ask him: “What was crèche like? What did you play? What did you have to eat? What did you do? What did you watch?” [F5]

Thus, routines allow a chance for parents to create a desired family atmosphere, one focussed on belonging and connectivity. Even though a routine allows parents to accomplish practical daily tasks (e.g. a bathing routine is for cleaning children, a cooking routine is for preparing food, a dinner routine is for eating food), this is not why parents feel they are important. They are seen as important because they give parents time to communicate with their children and foster healthy parent-child relationships.

#### 4.2.1.1.3 Couple connections

As with the previous two discussions on building connectivity, family routines are seen as important because they also create the opportunity for partners to foster deeper connections with each other and engage in marital maintenance behaviours. When it came to cooking together, having dinner together, watching television together, and late-night talking routines, couples emphasised the goals of communication and couple bonding, rather than the fact that these routines allowed them to accomplish practical, daily tasks:

It gives us time to catch up. I think for me, just keep me company in the kitchen. And it gives us time to chat about stuff that, we didn't get a chance to speak about. If he worked the night before then I barely saw him in the morning. Then when I come home from work then we can talk about what happened the previous night. That kind of thing. I think it is also good for our relationship. [F3]

That's why [the routine is] also important for couples or married people, to spend quality time with each other as well. That's why I'm saying I'm most of the time at work and whenever I have time I will spend it with her and [my daughter] and if [my daughter] is asleep then [my wife and I] spend time with each other. [F7]

Ja so [the routine is] just to stay in contact with one another because eventually staying with...like I said if you don't make use of that, at least an hour to even eat together, then eventually we're just going to be living past one another. I don't know what's happening in [my husband's] life and he doesn't know what's happening in my life and then eventually we're just going to be like strangers. [F10]

Sharing routines together was significant for partners, because it showed them that there was some form of “unity” and “understanding”, as one parent put it. In essence, apart from all the

other various goals family routines might accomplish, they are important because they create opportunities for family members to spend time together, communicate, reconnect and foster relationships because they are *shared* family activities. This holds various long-term benefits for individual emotional development and the maintenance of the family unit.

#### 4.2.1.2 Time together gives meaning to life

Throughout the interviews, the families often invoked the “family is everything” discourse, referring to the idea that the most valued and significant entity in life is the family unit. Thus, spending time with one’s family is regarded as the most treasured and esteemed thing a person can do. When asked about the importance of individual routines, the parents often commented that they created an opportunity for “family time”, which was highly valued:

The most important thing for us is to spend time with the family. I always refer to my job because I’m really with these kinds of cases, especially the domestic violence cases; you know where the husband beats up the wife or the children. Or when I see, especially, accident scenes where families are involved, I always phone and tell them “I love you guys” because I always think what if it was me and my family who is in that situation at that time. That is why family time is to me extremely important – to be as a family. [F7]

In the excerpt above, the husband, who works for the police, compares his own family situation with that of other tragedies he sees at work. It seems that witnessing these instances of violence and loss, and recognising the possibility of being in these situations and losing loved ones, highlights his desire to be connected to his family. Family routines are the setting in which he can attain this desire: “Some people might think that I might be a boring person, but for me family is the most important thing in my life.” Thus, his family life is valued above every other life sphere (such as work life or social life). Another father commented that he thought it good if a person balanced out his life by spending time with family members.

He continued by saying: “Ek dink dit, dit hou maar net die hele familie kring gelukkig. En jy is gelukkig om vir hulle te sien. Hulle is gelukkig om vir jou te sien. En ja dit maak dinge enjoyable” [F1]. Thus, spending time with one another creates happiness and makes life enjoyable for family members. He later continued to say: “Jy sien uit na sulke klein dingetjies. Want dit is tog dinge wat saak maak in die lewe.” In this way, routines are the settings in which family members can have enjoyable interactions with one another. This interaction is believed to give meaning to life and it is what family members desire and look forward to in their day-to-day existence. It is seen as “what matters in life”. This idea, that family routine interactions give meaning to life, was also emphasised by another parent: “So as ons dinge as ’n unit kan doen, as ’n familie, dan dink ek dan maak dinge meer sin. So ons sien so meer uit” [F3]. Thus, these interactions give significance to daily experiences, making life more enjoyable and giving family members something to look forward to in the future.

In conclusion, family routines may be the settings in which various tasks are accomplished, but because they are patterned family *interactions* (Wolin & Bennett, cited in Fiese et al., 2002), they are also the settings in which family members spend time together. During these times, family members form emotional bonds with each other and allow individuals to give and receive affection and support. Because families believe that the most important domain in a human’s life is his/her family life, these moments within routines make one’s time on earth enjoyable and give value and significance to existence.

#### 4.2.2 Settings for ensuring child development

The only other topic concerning the importance of various routines that was consistent enough to warrant mention as a theme was that family routines were the settings in which parents could ensure optimal child development. They allow parents to instil various

competencies and values in their children, but also helps them to ensure that, in general, the children become routinised individuals.

#### 4.2.2.1 Developing children to be more routinised (routine orientated)

When asked why they thought a specific family routine was important to them, three first-time parents commented on the importance of being routinised in general. Thus, rather than emphasising the importance of the primary tasks and goals of each specific individual routine, they focussed on the more general characteristics of routines, namely regularity, consistency in behaviour, timeliness. It was believed that routines were important because they developed more stable, time-regulated, well-behaved children:

Ons het altyd daai tyd gesê, voor [ons seun gebore was], as ons eendag kinders het dan sal ons daarvan hou om, om 'n Roetine te hê vir 'n kind, want jy sien dit kom by jou kinders wat net doen wat hulle wil, of jy die ouers, die ouers het nie 'n Roetine nie. Dan kan jy sien aan die einde van die dag die results: die kinders is 'n hand vol. Verstaan? Omdat daar nog nooit 'n Roetine was nie. [F1]

Wel, ek dink dis net om jou kind ook in daai roetine te sit. Dat die kind ook gewoon raak daaraan. Dit is so dit nie gebeur as ek nie, as ek [my seun] miskien volgende weekend na iemand toe stuur, dat hul sê: "Maar jou kind wil heel aand TV kyk. Wanneer slaap hy nog? Die kind wil nooit slaap. Die kind wil die heeltid nog speel. Is hy al gewoont aan daai? Is nie laat hy net daarin geglip het nie." Ja, vir hom is dit net, hy sal sy toys net daar los as die lig af is. Dan sal hy kom lê. So ek dink dit is belangrik vir *hom*. [F2]

Ja, die ouer wat nie by gehou het by die roetine nie, as die kind ouer raak dan wil hulle begin kwaad raak vir die kind. Maar hulle dink nie aan: ek het nooit 'n roetine gegee vir die kind nie, hoe kan ek nou op die kind afdwing om agtuur te gaan slaap. Verstaan? Want



hy het dit nog nooit gedoen nie. Hy is gewoon om tot elfuur TV te kyk saam met sy pa. Verstaan? So hoe gaan hy nou dit op die kind afdwing? [F2]

In essence, it seemed that what made these routines important for the parents was not merely the tasks an individual routine helps to accomplish, but the developmental benefits the routines provide. These benefits come across because of the intrinsic nature of routines (namely temporal regularity and consistency), causing children to be more routinised individuals, better structured, better disciplined, and easier to manage.

#### 4.2.2.2 Developing specific competencies and values

Besides allowing children to become more routinised individuals, family routines also create opportunities for parents to encourage cultural values and impart various competencies that they believe would be beneficial to their children. The types of values and competencies deemed important by parents varied between the different families, as did the different routines. This developmental orientation was present in television watching routines, house cleaning routines, grooming routines, brushing teeth routines, playing routines, visiting extended family routines, dinner routines, religious routines and bedtime routines. The examples used in this section are by no means exhaustive, but were chosen from the extensive range of discussions just to give an impression of how families connected various family routines with developmental benefits. For instance, one couple would watch television with their daughter on a regular basis. Although they felt that this routine was important simply because their daughter enjoyed the activity, they also felt that it “developed her mind”, as her mother mentioned. The father continued:

Well there is a lot of stuff on TV, especially in the mornings which is educational because if she watches some programmes she’s quite interested, you can see that if you disturb her

she will cry or she will do something and scream that you shouldn't disturb her, but most of the programmes are educational. We have to develop her. [F7]

Even though their daughter could not yet speak, they insisted on the importance of the routine by highlighting how they noticed her cognitive improvement:

You see she's too young, she can't easily talk properly. She watches Takalani Sesame [popular educational programme for children] in the morning and whenever we go to Bellville [suburb] you see Sanlam [bank that sponsors the children's programme] and she says: "Mommy, the Takalani Sanlam." It's just like seeing the word on the TV. We were so shocked for her to remember that. That's why every morning Takalani is also on. [F7]

The couple further highlighted that they believed this routine would benefit their daughter in the future and ensure that she developed into a healthy, balanced person, someone with personal interests, motivation and drive.

You get those children who are just never mind, who like to play, the one thing in their minds is just play. They don't like anything on their minds and that's something that she.... Like for instance my child, I would like her to do a further study of anything, because sometimes as parents you didn't have those opportunities in the past when maybe they didn't have enough money to send you to the college and universities. That is one of my dreams, to do that for my child. That's why we've actually discussed that. So one day whatever she wants to be, if she wants to be a ballet dancer, if she wants to be... whatever she wants to be, we will support. That's why we spoke about that as well, we have started saving for her studies one day, you know, investing in her future actually and that is one of the most important things for us. [F7]

From the quotes it is clear that this television watching routine is not merely a routine that helps pass the time. For this father and mother it holds very important developmental consequences. The routine is not merely a mundane daily task or event, but fits into future plans and long-term aspirations. The example above focusses on a routine that was designed specifically to include educational activities, and thus it is perhaps no surprise that the parents cited developmental benefits as the reason why this routine is important. However, developmental benefits were cited even in routines that did not centre on educational activities, such as a dinnertime routine or housecleaning routine. The following excerpt is an example of what parents answered when asked what their goals were with a family housecleaning routine:

Just so that [my child] can know that this is a broom and you must use it to sweep and that when there's dust, that's the duster. Then I show her the skoppie, then I pick it up, she keeps the skoppie when I sweep the dust into the skoppie. [...] Well, one day if she's older, she knows the whole house is like an area. She will be that kind of person who likes to be neat and just a normal person. Not: "it's just me so I don't care", that "I don't care" person. We're just trying to avoid that actually. [F7]

Thus, having children involved in family routines ensures that they develop certain personal values (e.g. personal care) and it also helps children gain skills in how to use certain tools (e.g. a broom or duster) so that they can implement these values. In another family, a dinnertime routine was important for the couple because it instilled in their child the belief that one's family (and family connections) should be valued: "It's very important to have dinner as a family; I think that's the most important thing and it's what we want to teach [our child]" [F9]. Thus, in this case, spending time together allows the parents to perpetuate the "family is everything" discourse discussed in Section 4.2.1.2 above and to pass these beliefs

and values on to the next generation. In another example, parents often emphasised that socialisation routines (such as playing with siblings, nephews and nieces, or friends) were seen as opportunities for parents to teach children how to interact with fellow human beings in a cooperative and respectful way. The next quote from one of the fathers shows sentiments shared by many first-time parents when it came to playing routines:

Ek sal met hulle speel, wat vir my belangrik is, want hulle moet, tussen hulle twee moet hulle kan weet hulle moet mekaar kan respekteer en [my een seun] speel met sy eie ding en [sy tweeling boetie] speel met sy eie ding sodat hulle nie aanhoudend met mekaar kan baklei of op mekaar skree nie. [F4]

Six out of the ten families emphasised at some point that teaching their children to play cooperatively with other children was an important aspect of their family routines. Other morning routines, such as getting dressed for day care, or children helping parents to pack and double check bags before they leave the house, also had developmental benefits:

It actually just teaches them some responsibility so that one day when they do reach high school, then they don't come with the cock and bull story: "but I forgot my book". Because it's been built into them from day one: make sure you've got everything. [F4]

Thus, even though a packing-bags routine ensures that children have food and clothes for the day, this routine has the added benefit of teaching children responsibility and conscientiousness. These secondary benefits are what seem to stand out for the parents, more than the instrumental, task-orientated goals. To further illustrate this theme, various lines from interviews are presented below: "[it is] for the future when [my child] has a family of his own" or "it will give them better judgement so that they know the difference between right and wrong" or "if we don't stand for something then [our child will] go with anything

that he finds outside [the family]” and “the consequences would be there would be no structure in [our child’s] life”. In conclusion, family routines are important for parents because they are the settings in which parents can pass on the family’s values to their children and give them the needed skills to become competent and successful adults.

#### 4.3 Themes Relating to What Challenges First-time Parents Face in Sustaining their Daily Routines

The third research question was: *What challenges do first-time parents face in sustaining their daily routines?* During the data analysis, one overarching thematic category became evident that relates to this research question, namely: *factors that increase task and temporal complexity*. Themes that fell under this category could be further clustered into *extra- and intra-familial barriers* that increase task and temporal complexity. Three extra-familial barriers seemed to be particularly related to this increase in complexity, namely *transport limitations, workplace schedules* and *extended family involvement*. Similarly, three intra-familial barriers seemed to be particularly related to this increase in complexity and were: *child related difficulties, incongruence between the needs of various family members*, and *health-related challenges*. Finally, a third sub-theme became evident that also fell under this overarching category, namely a *composite of intra- and extra-familial barriers*. This theme simply points to the realisation that a combination of more than one challenge from outside the family unit and/or from within the unit was usually present in the lives of first-time parents. The overarching thematic category, its three sub-categories and the respective sub-themes within the first two of the sub-categories are presented in Table 4.3 and discussed below.

Table 4.3

*Major Thematic Categories, Sub-categories and Themes Related to What Challenges First-time Parents face in Sustaining Their Daily Routines*

Overarching thematic categories	Sub-categories	Specific themes
Factors that increase task and temporal complexity	Extra-familial barriers that increase task and temporal complexity	a. Transport limitations and restrictions b. Workplace schedules c. Extended family involvement
	Intra-familial barriers that increase task and temporal complexity	a. Child-related difficulties b. Health complications c. Incongruence between family member's needs
	A composite of intra- and extra-familial barriers	

#### 4.3.2 Factors that Increase Task and Temporal Complexity

Factors that increase task and temporal complexity are various aspects of the family's life that make their routines more demanding and harder to manage and the specific time frames harder to adhere to. This happens by either decreasing the available time that families have to engage in family routines (e.g. working late), making it harder to plan and schedule (e.g. unexpected extended family demands), causing constant variation in time schedules (e.g. shift work), making it harder to accomplish tasks within a specific time (e.g. health problems or child temperament), or increasing the number of tasks that need to be performed during a specific time frame (e.g. incongruence between the needs of different family members). Each of the extra- and intra-familial sub-themes listed in Table 4.3 will be discussed separately.

#### 4.3.2.1 Extra-familial barriers

##### 4.3.1.1.1 Transport limitations

Limitations such as having only one car (or no car), traffic, and child-unfriendly public transport systems created hassles for couples. For instance, five of the ten couples mentioned that they drive together to and from work. This is because they either only have one car or, as in one case, only one parent is confident enough to drive. Thus, parents have to leave together from their homes, even if they start work at different times. The time spent driving to both parents' destinations needs to be factored into the sequence of routines, thus decreasing the time they have available for other activities. One father specifically mentioned the need for a second car, explaining: "We think of getting a second car. It will make our lives much easier because [...] my [wife and son] can both sleep later if I'm not working. You know? So that is a concern for me" [F3]. Thus, this father recognises that driving together complicates his wife's mornings. Besides for the fact that he feels it puts her life in danger, it also takes away extra time they could have spent on other routines, such as sleeping. Another father, from family six, mentioned that when his wife becomes confident enough to drive, she could take their son to the crèche and he could take the train to work, which would be "much more relaxing" than sitting in traffic. For this couple, traffic makes their lives particularly complicated because they have to get up very early in order to miss traffic so that they get to work on time. This couple has to leave home at ten past six each morning. They also commented that they could rarely turn back if they forget something at home, because just five minutes extra would mean that they get caught in traffic and arrive late at their destinations. Their mornings are also so rushed that they have very little extra time to engage in enjoyable family activities, such as eating breakfast together.

Using public transport was another cause of stress. One mother explained how difficult it was not having a car that worked. This meant that she had to take a taxi to drop off her child at day care, which was quite a distance from where she worked and lived:

I took [my son] to crèche in the morning. We don't have, our car is not driving at the moment and it's very difficult to travel with him because why? You know where his crèche is? I had to take a taxi all the way and all the way back here [where I work]. [F8]

Besides travelling distance, it is also very difficult to travel with a young child and the daily items needed by the child while using public transport. Thus, at the time of the interview, this mother was making other travelling arrangements with her parents so that she did not have to struggle with this complicated routine. This same problem was experienced by a mother who also lived quite a distance from the crèche:

Yes, I used to go to work with public transport but I think after a while it became a bit difficult when I had to travel with the taxi with [my son] and fetch him with the pram as well, the pram wasn't folding up and so, it became quite difficult. [F10]

In conclusion, travelling restrictions, such as travelling with one car, travelling long distances, travelling with a young child and using public transport, and travelling during peak hours on popular roads can greatly restrict or complicate a family's sequence of routines because they decrease the time that is available for other enjoyable family routines (which most likely increases the temporal incongruence, as discussed in Section 4.1.3).

#### 4.3.1.1.2. Workplace schedules

Workplace variables were one of the most talked about complications when it came to managing a family Routine, and greatly increased task and temporal complexity. Nine out of



the ten families mentioned work as a barrier to managing their routines. Work affects families in two ways. The first is when parents work long hours and do not have enough time with their families, thus increasing the likelihood of temporal incongruence. Secondly, when working hours are irregular or unpredictable it makes it harder for families to plan their time together and to find some form of consistency in their schedule.

The first excerpts show how long working hours can decrease a family's time together:

Just the, the coming late. If we would have been home by four we would have gotten much more in with [our son] and it's just, there's not a lot of time because I can't let him go sleep ten, nine. Because I'm gonna struggle tomorrow morning. So there isn't, because basically there is an hour to an hour and half that we are actually spending time with him. [F4]

Well, we do with what little time we have. When we get home, we go to make food and eat, watch television, go sleep, cause we have to get up early. You know? And, ja. We don't have much time. So four hours max. So in that four hours we need to cram everything in: bath, get food ready and whatever, then go to bed. [F3]

Note the mention of the words "cram everything in", indicating the congestion experienced during family routines. This same sense of structure can be seen in the quotes used in section 4.1.1.1. Thus, a workday seems to have a very tight sequence, containing many tasks that have to be completed in a short period of time. How the presence of work affects the family's daily schedule can easily be seen when contrasting workdays with non-workdays (such as weekdays versus weekends). When parents are not working over weekends, they do not have such a structured and demanding sequence. These sequences are more loosely organised than during the week. Thus, certain activities are still done, but their start and end times are not

enforced as strictly and seem to have a flexible temporal structure. One mother commented on their weekend routines, saying “We still keep it set but not as time based”. Her husband echoed this sentiment: “[Our sons’] Routine is required but not at the same timeline as during the week. You still have to do it, it’s just you are not doing it *as* early.” Furthermore, if a parent did not adhere to their sequence of routines during the week, it had problematic consequences: “So, as jy nie daarby hou nie, dan verloor jy jou lift, of jy kom laat by die werk.” In contrast, the consequences of failing to adhere to the sequence of routines on weekends are not as severe. One couple described their weekends as having a familiar pattern, but added that “the weekends are really up to change”. They also stressed that “it’s not a train smash if we don’t go out or if we didn’t do a specific thing”. Most of the parents in this sample mentioned that weekends (when they did not work) were up to change. And weekend activities were frequently described using the words “if”, “or”, “maybe” and “sometimes”, indicating the flexibility and choice surrounding these routines. Notice the words in bold in the next quote:

On Friday evening, I, I try to do the washing on a Friday evening, **if** we don’t have friends over **or if** we’re not invited somewhere then I would be at home **or** we would be at home and then I would try to start the washing. So the load, on Saturday morning that time is for the cleaning then. So Saturday mornings we do cleaning, waking up, cooking breakfast, we will have breakfast together, and then I start the washing and do the cleaning and he will help me. I’ll do the washing. He will hang it out for me and we will clean the house together. So when we’re done **maybe** we hit the shops after that. **Or maybe** go to friends or family and Sunday morning we will be going to Church, **if** we’re not too lazy. So I try to get a lot of time in with my family and friends over the weekend. I **maybe** invite them over **or** he’ll invite his friends over we’ll have a braai, but that’s not every weekend. So **if**

it's not happening where we're invited, we will **maybe** have somebody over here and it's the same for Saturday evenings. [F6]

Note how they have a wide range of options available to them. Even though there still are a few set tasks like cleaning and doing washing, there is not the same sense of urgency or sense of being as time based as during the week. In contrast, this same couple had an extremely intense schedule on days when they worked:

You know so this whole morning routine is determined by time. [...] But yes, that half an hour, 45 minutes in the morning, it doesn't really allow you for a lot of error, meaning forgetting a bag, forgetting my laptop, forgetting my wallet. So if we forget something and if we're still here, then it's fine. I just reverse back you know, but it doesn't really allow me too big a room for errors.

In other words, the presence of work duties and lack of time during the week require the family to adhere to their sequence of routines and times very strictly.

Constant change in working hours also puts strain on families. One father, who has a very stressful job as a detective, was particularly passionate about the negative effect work had on his family life. His place of work constantly denied him leave and his working hours varied on a daily basis. He had a hard time planning his family routines, because work was so unpredictable and could compel him to stay after hours at any moment. This also affected his relationship with his wife when he had to cancel their plans:

As I said, when we have to work on operations I *have* to go. Say for instance [my wife and I] say we will go out maybe tonight and then this morning [my commanders at work] tell you you're working tonight, or you're working this weekend, or you're working that time,

or you won't go home unless you've arrested that suspect, or do that or do that. I'm actually thinking of getting a new job, but anyway that's what my wife understands, especially in my type of work. [...] That is the thing because I phone and say I have to work a bit late and then she will get upset. I can't help it you know. It's work and that is stuff that interferes also in our relationship as husband and wife and that is why I'm saying my commanders at the station or everywhere, the main guys, they don't understand these things. [F7]

When workplace schedules constantly change, families struggle to stick to a set sequence of routines. Two fathers especially mentioned shift work as being problematic. During the interview, one couple really struggled to describe what their morning routines looked like and frequently stated that it “constantly changes” and “it's complicated”. The excerpt below illustrates the complexity of their schedule:

Okay, we wake up at quarter to seven. If [my husband] works, you see it's always different if he works, or if he doesn't work, if he works then, uh, we get up at six, drop him off. Oh, um, first get everybody done, but [my husband] will get up an hour earlier and get himself done, and then I will get up at six and [my husband] will get [our son] done and then I will just get myself done. [My child and I] would drop [my husband] off then drop [our son] off and then I will start, go to work. [...] But now if [my husband] doesn't work and then we get up at quarter to seven and then [my husband] would get [our son] done and then I would just also get myself done and then [my husband] would drop [my son and I] off. We would drop [our son] off first at the crèche and then he would drop me at the station for work. [...] I was just thinking that it is actually more complicated because if he works night shifts then he is not here in the morning. Then [my son and I] would get up at six thirty because then I would get both of us done. [F3]

Thus, this family manages a schedule that constantly varies. They explained that a week never looks the same. This father gets his off days during the week, when everyone else is working, and rarely gets to engage in family routines on weekends. Another father, who used to work night shifts when his son was very young, also commented on how difficult it was during that period:

I would have supper while everybody else was sleeping and I'm sitting behind a PC doing nothing. You know? And uh, there was no fixed, I mean, there was three different shifts I was working. So working the night shift I wouldn't see my son here. You know? And uh, the only time I'd actually see them was when I worked the morning shift and then I'll be home before [my wife] gets home. I'll try and clean up so we can spend a bit of time together. [F5]

One mother described how her family struggled to stick to their evening routines when she occasionally had to work late and how this change made it very hard to adhere to their sequence and their temporal structure:

Sometimes nightly routines don't always fall into place because if I work late, which is like once a month from seven o'clock to seven o'clock, [our children] don't get bathed because we don't want to take them out into the cold again in the evening. So then we [all] come home at half past seven. But then [our children] still eat, but we don't actually bath them between seven and half past eight cause it's a bit late. But then you also miss peaceful time cause "you need to get into bed, mommy is feeling tired". So the timing of *everything*, it, it does mess it up, then you can't actually stick by it. [F3]

Her husband also explained that working late caused problems for him: "And it's a nightmare. Because a couple of times, last minute, now I have to work late and then it just

throws everything out.” When this happens he has to phone friends and family to see who is available to pick his son up from the crèche.

In conclusion, it is clear that work life often intrudes upon family life and can greatly complicate the family’s routines. Longer working hours mean less family-time routines, and variability in work impedes the family’s ability to adhere to their desired schedule.

#### 4.3.1.1.3 Involvement of the extended family

One interesting finding was that many couples did not follow the expected family life cycle pattern described by McGoldrick and Carter (2003). McGoldrick and Carter postulated that the young adult first leaves the home of his or her family of origin, then finds a partner to marry, and then the new married couple will have children. However, at the time of the transition to parenthood, seven of the couples had not gone through these three stages in the expected order, and especially deviated from this pattern in terms of living arrangements. These seven couples lived in the home of their family of origin during various phases of the transition to parenthood. In four of the seven cases, both partners were staying with one of the partner’s parents when their first-born arrived. In the other three, the partners still lived separately during the time of birth. In these three cases, each partner lived with his or her respective parents at the time of the birth, and one of them moved to the other family of origin house after a few months. At the time of the interview, five of the seven couples were still living with one of the partners’ parents. Many of these living arrangements also included other adult siblings ( $n = 5$ ). Though all the couples gave multiple accounts of how their families supported them (discussed in Section 4.4), two couples spoke about extended family involvement that also negatively affected the management of their routines. One couple mentioned that their parents’ involvement created irregularity within their routines. This couple currently stayed with the wife’s parents. Because of this their child would often go

upstairs to sleep with his grandparents and then it would be hard for the couple to ensure that their child's morning routine happened as it should:

And because [my son's] routine gets thrown out completely if he sleeps on top by my parents than if he sleeps by us because he doesn't wake up at the same time. Like, if he's sleeping by us he wakes up very early, which is convenient for me because I don't have to struggle to wake him up in the morning, but when he sleeps by my mommy, he wakes up when he wants to because my mommy is also early out of bed so, there's now nobody to wake him up. [F8]

Thus, living with extended family in this case makes it harder to regulate routines and keep them stable, because the mother's parents do not adhere to the same morning routine as the couple and do not implement the same structure and discipline as the couple. The other problem this couple spoke about was keeping desired boundaries between them and the father's family of origin. The father's family often ask him to do favours, or to assist them with tasks. Not being able to establish boundaries makes it difficult to manage routines, because it disrupts prior family arrangements. The next excerpt reveals the mother's frustration with the situation, but also her understanding in that she recognises how difficult it is for her husband's parents to get used to not living with him:

It's like [my husband's] father can't accept that he has a family of his own and his father is forever wanting [my husband] there by him, but he forgets he has a wife and a son because he stayed by his parents for over 20 years, a good age before he walked out there and it's still as if they can't get used to it. [F8]

Her husband further explained how this disrupts their plans:

The thing is just when like, when your parents tell you to do something they want you to do it now, but they're not knowing you've got something to do of your own. That's the thing, that I've got plans. [F8]

The only other family who explicitly mentioned the involvement of their family as a problem was family number seven, who lived in a very small house with the wife's brother, sister and mother. When asked what made it harder for them to stick to their Routine, the mother commented: "It's people who don't know our routines who come and interfere." The couple explained that they found it difficult when family members contradicted the instructions they gave to their daughter. Thus, they would tell their daughter she may not do something and find that other family members go against their wishes and allow her to do so. The father seemed upset by this disruption and intrusiveness into their planned routines, because it affected their plans for her development: "Because we know exactly how we teach our child to grow up and in what direction, because we're trying to *teach* her." His wife ended: "They make her confused." In essence, establishing appropriate boundaries between the nuclear family and the extended family is sometimes a challenge for couples and it makes it hard for parents to institute regularity and consistency in their Routine.

#### 4.3.1.3. Intra-familial barriers

##### 4.4.1.2.1 Child-related difficulties

The theme child related difficulties relates to the new task demands necessitated by the child, child needs, behaviour difficulties, and irregular sleep-wake cycles. A few parents mentioned that, when their first-born arrived, their child compelled additional activities that they needed to fit into their already existing sequence of routines, making their sequence more complex:



Ja, and of course, getting to work, we've been up through the night, you still need to get to work, you still need to do *your* daily activity *and* still manage to squeeze *his* activities in. It's hectic. [F5]

Dit was hard. Ek was, vra vir [my man], ek was baie lief vir slaap en laat slaap en wanneer ek die kans kry het ek geslaap, maar toe die kindertjies kom is dit daarmee heen. Soos ek sê, jou tyd is nie meer jou tyd nie, dis jou kinders se tyd. Dit was nie een [kind] nie dit was [’n tweeling]. Dit was nog erger. Ja, dit was ’n groot aanpassing. As daar kinders in ’n mens se lewe kom dan is dit ’n groot aanpassing. Jou tyd is nie meer jou eie nie. [...] So dis sakke pak, hulle het spesiale melk gedrink. Dit was baie goed om in te pak. Die heeldag se klere, kos, alles en vroeër te ry en jy het baie goedjies wat jy moet adapt jong. Alles moes vroeër klaarkry en soos ek sê, half agt begin ek werk. Binne-in ’n raamwerk moet jy sorg dat jy by die werk kom. Dan gewoonlik, toe daar nie kinders was nie kon ek laat slaap en ons ry laaste minuut. [F9]

From these excerpts it is clear that the mothers experienced an increase in tasks and activities that had to be performed after the transition. As excerpt two shows, the addition of children caused them to be less relaxed (not being able to sleep late, or leaving at the last minute). There is less time flexibility and choice when it comes to deciding which routines they want to implement.

However, besides the addition of new child routines, four couples also spoke about behavioural difficulties. When asked what concerned him about their evening routines, one father said:

Weet jy [my seun] kan soms sommer vol draad wees. Uhm, daar is tye wat hy nou sy movie kyk en dan het hy nie genoeg gekyk nie en dan wil hy nog kyk en nog kyk. En ek

probeer hom van die televisie af hou. Ek dink 'n televisie kan 'n evil raak vir 'n kind verstaan? So hy moet, hy sal moet begin leer: uh, *dit* is my televisie kyk tyd en *dit* is my bad tyd. Verstaan? Somtyds dan sukkel ons 'n bietjie om hom hier weg van die televisie af en in die stort te kry. [F1]

Another couple commented that a concern for them in the mornings was their two sons' crying when they did not get their own way: "If we could get that out of them", the mother stated, "that would help a lot" [F4]. Similar to this situation, one parent, from family five, raised her concerns by stating: "It would be much easier if I can set his mind straight. So, 'it's morning, we need to *leave* now'. So, that is the only thing I'm still struggling with." In order to deal with behavioural difficulties, another three families mentioned that they dressed their child while they were still sleeping. One mother explained that if her son was awake it became a "hassle", because he would try to do other activities. In these cases they struggled to leave the house on time: "Ja, so then, just, the whole sequence is out if [my child is] awake at that time of the morning" [F6]. Furthermore, the number of children present during the transition to parenthood also adds to this complexity. One couple had twins and had to deal with double the amount of behavioural challenges after the transition: "It can get hectic with twins. The twins they used to fight and bite a lot. The fighting and the biting stopped, but it was hectic" [F9]. Very young children also require a fair amount of attention from parents and often desire their parents' constant presence. This may hamper the parent's ability to accomplish other required daily tasks:

The baby, she always wants to be picked up, sit with her. If you put on a DVD for [my daughter] like for Barney, then [she] wants you to sit with her and sy soek soveel baie aandag. Dan gaan die tyd verby en dan "o, ek wil dit gedoen het" dan is die tyd verby, dan draf jy weer vir die volgende ding. Die kinders vat baie aandag van 'n mens en hulle is op

hierdie stadium wat jy ook baie aandag aan hulle moet gee. Die een is meer stouter as die ander een. [F7]

Besides requiring constant attention, which impedes the parents' abilities to be as time efficient as possible, newborns' irregular sleeping patterns also disrupt parents' sleeping routines:

You know when the baby is still small then you sleep less because of getting up during the night for feedings and whatever, so we adapted that and it's not like every night she sleeps through, some nights she wakes up at three in the morning and I have to give her a bottle and change the nappy, then she goes to sleep again. It's also tiring, so that's also a huge thing to adapt to. [F7]

Another mother explained that the unpredictable and irregular sleeping patterns of her child derailed her usual Routine. This mother preferred to wake up very early in the morning, but because she was tired she struggled to adhere to her usual temporal structure:

Because why, my usual Routine was, because I'm waking up early in the morning, was like, that throws it out because babies don't have a real time for when they wake up. They wake up in the middle of the night, or late in the morning. So that threw me out completely. [F8]

Thus, as these excerpts from the interviews show, children's temperaments, behaviours, needs and sleeping cycles can all cause irregularity in a family Routine, or make it harder for parents to accomplish their required daily tasks within the necessary time limits.

#### 4.4.1.2.2 Incongruence between family members' needs

An incongruence between different family members' needs means that various individuals do not want to engage in the same family activities. This type of incongruence can be between parent and child, or between the spouses.

Many couples mentioned that they did not have the freedom and flexibility to do what they wanted anymore. Their choices had become limited to activities that involved and entertained their child/children. Although this was not always experienced as problematic, it did affect some parents. One father mentioned television watching as one routine in which he had to relinquish his own desires because of his son:

TV was before seven, was ons sin. Jy kon gekyk het wat jy wil. Maar deesdae is dinge ook verander. Ek is nou geforseer. Hyt sy kyk wanneer *hy* nou TV kyk. Jy't, al is dit nou dieselfde program wat jy nou drie, vier keer oor kyk, jy sal dit nou maar net weer *moet* oor kyk. Jy sal maar moet. [F1]

When asked what concerns him, this father also mentioned that he looked forward to a time in the future when he and his son could engage in other enjoyable activities, rather than sticking to his son's current routines:

Hy sien nog nie die genot daarvan om te kan lees nie. Kyk ek sien eintlik uit na daai stadium wat hy begin lees en sê: "Daddy can we go to the library". En ek kan hom daai kant toe vat. En, of um, hy is miskien ouer en hy sê: "Daddy take me to soccer practice". Verstaan? Sulke klein dingetjies. Jy sien uit na sulke dinge. Maar omdat hy nog nie by daai stadium is nie, is ons maar nog in sy Roetine. [F1]

Thus, this father feels it is not yet possible to do father-son routines that he, as an adult, also enjoys because of his son's age-related interests. When asked how the transition to parenthood affected their routines, another mother also stressed that it entailed relinquishing her own personal desires:

You can't just sleep when you must. You can't just come home, flop yourself on the bed and conk out anymore. You can't do that anymore. You obviously need to see to [the children] first before you can look at yourself. So it does take a lot out of you: physically, emotionally and mentally as a parent, because you have to see to them. [F4]

Thus, the needs of parents and their children are not always congruent with each other. Because parents spend so much time focussing on their child's needs, they often have to find other times in which they can satisfy their personal interests. The couple above used their Saturdays to resolve this problem. However, when both parents had things that they needed, or wanted to do, managing these activities becomes a complex task. The same mother as above stated:

Saturday is more of um, what [my husband and I] would like to do, when on a Sunday we will make it *family* day. Um, that's like the only concern because obviously we need to weigh up what [my husband] needs to do on a Saturday and what I need to do on a Saturday. But when [my husband] needs to do something on a Saturday [the children and I] would be at home, at home either doing the washing or whatever, so that he can have like his time. So, it worries a bit, um, trying to find over the weekend who gets to do what and who gets to do it when. So, that's the hard part: trying to juggle. [...] Who needs to do what? What is more important? What must come first? What must come second? That is the difficult part over the weekend. Trying to weigh what needs to be done and what can still wait. [F4]

Thus, because family members have divergent needs and interests, it becomes a challenge to satisfy everyone's needs and fit these into their sequence of routines. Another couple also mentioned disparity in interests as a problem. In this case, each partner disliked the other partner's relaxation activities. When asked what concerned him about his weekend routines, this husband felt that his wife spent too much time at the shops. She responded by saying:

Maar soos vir hom is dit sport. Ek sal nie sê ek hou nie van sport nie, maar sal nie nou so heeltyd so kan sit en sport kyk nie. Sal eerder in die winkel loop, waar dit miskien vir [my man en kind] definitief sal irriteer om so te loop die heeltyd. Maar voor die TV te sit en sport te kyk sê ek eerder vir [my man]: "loop ek maar in die winkel rond". [F2]

Her husband also found their dinner routines problematic, because he wanted to eat dinner around the table, while his wife enjoyed eating dinner in front of the television watching a popular South African soap opera. He explained: "Ek sal mos dan alleen daar sit terwyl hulle *Sewende Laan* kyk. Ek kyk mos nie baie graag daai goedjies nie." During the interview there seemed to be some tension between the partners concerning this topic, especially when looking at their tone and body language. Thus, because of divergent interests and needs, the dinnertime routine was on occasion not a shared family activity.

In conclusion, when there is incongruence between the needs and interests of family members it can complicate their sequence of routines. Whether there is incongruence between the needs of the parent and child, or whether there is incongruence between the needs of each partner, these cases always complicate the sequence because there are more tasks that need to be performed. Managing who gets to do what and how these interests will be satisfied can be tricky. It could very easily lead to one person relinquishing their needs for the sake of other family members (see Section 4.4.1.2.5), or cause tension and frustration when these divergent needs are not managed successfully.

#### 4.4.1.2.3 Health complications

Three children and three adults had experienced health complications during and after pregnancy. These health complications made it harder to stick to family routines. One mother struggled to accomplish tasks at home because of an injured back, while another mother spoke about difficulties with hypertension during and after her pregnancy. Both women mentioned how this hindered their ability to accomplish tasks. This is what one of them said:

I couldn't even walk the first month [after the pregnancy], I had so much water, swollen up and because of the high blood pressure I had to rest most of the day, sit and keep my feet up. [My husband] did everything for me. We were both in the shower, then he washed me, he helped me with everything. [F7]

The inability to accomplish tasks was not only an issue when the parent experienced ill health, but also when children experienced health complications. This is what one mother said when asked how her child's health affected their family routines: "Sjoe! A lot. It actually made me paranoid because why I always wanted to keep my eye on [my son]. I would leave behind whatever I wanted to do now and I would rather sit and watch him" [F8]. In this case, her child had almost died because of a very high fever, and this caused the mother to be hyper-vigilant about her child's safety. This produced disruption in, and even abandonment of, their routines. The same problem was experienced by a couple whose child had trouble breathing:

[My dogter se] neusholtes het nooit ontwikkel nie. Sy moes oopgeboor gewees het en pypies ingesit het en ek moes vir drie maande dag en nag moet ek met 'n masjien die pype oopgehou het. [...] Ek was baie moeg. Ek is 'n diabeet ook. Die pregnancy was hectic en om dan straight te hoor jou kind het 'n operasie ondergaan en dis die storie, nogal moeilik. Met haar op daai stadium, daai eerste vier maande was daar geen Roetine vir [my dogter],

waar met die twins dit anders was. Jy kon hulle feeding time, bottle time gee. Daar was 'n Roetine vir hulle, maar met haar glad nie want as sy verstop en sy trek toe in haar slaap dan moet jy sukkel dat jou kind asem kry. Daar was geen Roetine daai tyd nie. Hulle moes maar aangaan op hulle eie en kos maak en... [F9]

In this passage one can see the difference in adherence to routines when a child has health complications and when a child does not. When this mother had her twins, she found that there was some form of regularity, whereas with her daughter there was a complete lack of Routine. It also suggests some form of fragmentation in the family, as the rest of the family had to go on on their own, while she took care of her daughter (“aangaan op hulle eie”).

In conclusion, various factors, both inside the family system and outside the family system, affect the family's ability to choose routines, accomplish and adhere to chosen routines, regulate schedules, and adhere to timetables. These factors are key reasons why first-time parents struggle to manage their family routines.

#### 4.3.1.3 A composite of factors

Although the factors mentioned above were each discussed separately, it was often evident that it was not always the presence of one such factor that complicated these families' lives and made it hard for them to manage their routines. It was often a combination of extra- and intra-familial factors experienced at the same time that made managing a family Routine difficult. For example, it was the presence of complicated work schedules, transport limitations, health complications and new child demands that all increase task complexity and temporal variability. This next quote is from the mother whose daughter had breathing problems after birth, and shows the presence of a multitude of other complications that also affected the family's routines:



Because I didn't have [a nanny] for [my daughter], I had to take lifts with somebody else and then went to the crèche. Packing her bag and running up and down, getting dressed, putting lunchboxes for everybody. Then I woke up at five. I used to wake up at five then. [F9]

Thus, on top of the fact that these parents were struggling with their child's health problems, the excerpt shows struggles with the new task demands of the child, a lack of available extra help and transport restrictions. Note her adjustment in the sequence's temporal structure to accommodate for this composite of challenges. Similarly, the quote below reveals the multitude of obstacles facing a couple dealing with health complications, irregular work schedules, the new routines of an infant, and stressful child behaviours:

So I was, I was hospitalised two months before [my son was born], a month after him. You know so it was frustrating for me and now it's a whole new Routine with a baby and he was colic and he was crying all the time and I didn't know why he was crying, it was distressing to me and my husband's working night shift and it was a bit stressful. [F5]

It is possible that, when these factors are all heaped onto a family's plate, it becomes increasingly difficult to manage a satisfying and desirable Routine. This is because an increase in these challenging factors makes the sequence of routines or tasks even more complex, and makes it harder to manage time schedules. This is related to the discussion in Sections 4.1.2 and 4.1.3 in that an increase in barriers may increase the likelihood that the sequence of routines is not as functional for the family, or that they experience incongruence between the routines they would *like* to engage in and the available time they have to perform these routines.

#### 4.5 Themes Related to What Assists First-time Parents in Maintaining their Family

##### Routines

The fourth research question directing this study was: *What assists first-time parents in maintaining their family routines?* During the data analysis, six themes were identified that related to this research question: *support from the wider family network; couple cooperation and tag-teaming; planning and pre-empting future problems; sticking to the sequence and temporal structure of routines; competencies and characteristics of individuals; and parents' sense of commitment and responsibility towards family members.* These six themes could be grouped into two categories: *extra-familial resources* and *intra-familial resources*. There was one unifying aspect that connected all of these themes together, which was that all of these factors help to decrease the temporal and task complexity of the family's sequence of routines. Thus, *factors that decrease task and temporal complexity* was selected as the overarching thematic category. The organisation of these themes is presented in Table 4.4 below. The section following Table 4.4 first discusses the relevance of the overarching category, and then focuses on each of the themes.

Table 4.4

*Themes Related to What Assists First-time Parents in Maintaining Their Family Routines*

Overarching thematic category	Sub-categories	Specific themes
Factors that decrease task and temporal complexity	Extra-familial resources that decrease task and temporal complexity	a. Support from wider family network – “Dit is key”
	Intra-familial resources that decrease task and temporal complexity	a. Couple cooperation and tag-teaming b. Planning and pre-empting the future c. Sticking to the sequence and temporal structure of routines d. Competencies and characteristics of individuals e. Parents’ sense of commitment and responsibility towards family members – “Jy moet dink aan jou huisgesin”

## 4.4.1 Factors that decrease temporal and task complexity

Factors that decrease temporal and task complexity are aspects of the family’s life that make their sequence of routines less demanding and easier to adhere to within specific time frames. Each of the themes listed above does this by either helping to regulate time schedules (e.g. planning and pre-empting future problems, as well as sticking to the routine), making it easier to accomplish certain tasks (e.g. couple tag-teaming, as well as competencies and characteristics of individuals), or decreasing the number of tasks that parents have to perform in a specific time (e.g. extended family taking responsibility for some tasks, as well as parents’ sense of commitment and responsibility).

#### 4.4.1.3 Extra-familial factors

##### 4.4.1.1.1 Involvement of extended family and family of origin – “Dit is key”

When looking at themes, there was only one factor outside the nuclear family that helped to decrease temporal and task complexity: the involvement of the couple’s extended family and family of origin (e.g. the couple’s parents, sisters, brothers, aunts and uncles). This theme was very prominent in the data. All the families relied very heavily on the wider family network to accomplish their multiple tasks.

As mentioned earlier, many couples still lived with older parents and families of origin during the time of the transition. Because of these living arrangements, the grandparents were very involved in the lives of these first-time parents. Most families were very positive about this involvement, apart from the two families who mentioned a few problematic consequences (discussed earlier in 4.3.1.1.3). However, even for these two couples it was not all negative and they also greatly relied on family to help out. For instance, grandmothers often help to drop off and fetch grandchildren at the crèche, and also assist with cooking. One father, whose mother lives with them, commented on her involvement:

I find it to be convenient at times, especially after work when [my wife and I] have to do something. Like, for example, [my wife], on Friday, um, we are fasting now and then last night she had to go to the shopping mall and I worked a bit late so I know that my mom’s going to go to the crèche. It’s just down the road from here. So in that sense it’s kind of convenient for us. [F5]

His wife added: “If there is a crisis, like we overslept or something, then she would take [our son] to crèche.” This mother also mentioned how her mother-in-law’s involvement helped her cope with the transition directly after the birth. Another young mother, who lives with her husband and his parents, explained that her mother- and father-in-law’s involvement helped

them to maintain their Routine, because the older parents knew the young couple's Routine well. When children did not stick to the Routine, these grandparents could assist new parents in reinforcing appropriate behaviour. Also, when the mother falls ill, the grandmother takes over because she understands how the family's routines work. Another grandparent helped her daughter stick to desired routines by waking her up when she overslept after being up all night with the baby. The new mother commented:

So that [child's irregular sleeping patterns] threw me out completely because I wasn't used to it, but luckily for me I had my mother, so if I did end up falling asleep my mommy would wake me up and tell me. Some parents if they're on their own it's harder for them. So it was easy for me. [F8]

This young mother also mentioned the assistance of her 17-year-old brother, who lived with them. When she was running late she could ask her brother to do washing or start cleaning the house, thus helping her to accomplish all her required tasks. Grandparents staying in the house also helped couples keep an eye on the children when they needed to focus their attention on other duties. New parents might have struggled to do these tasks efficiently if their children were present:

For instance if I go to hang up the washing then my mother is here to keep an eye on [my daughter]. Then [my mother is] here to take out the blocks or toys I put in the front room then [my daughter] can be busy, just to get her mind off me, like I'm going out or otherwise she will go upset. Then my mom is there. I never leave [my daughter] alone because in this stage she's like, you have to keep an eye on her. [F7]

Thus, because young children need constant supervision, being able to hand over a child to someone else frees up space for first-time parents to quickly accomplish other routines. Also,

this young mother's sister, who lives in the same house, is busy with an Educare diploma and works at a crèche. The couple found her particularly useful in assisting with difficult childcare tasks that they struggled with. The sister was also useful for the new parents when it came to acquiring childcare knowledge and skills:

[My sister] always gives us advice as well, she's also busy with children you know, working in a crèche. That's actually what we like about people giving us advice because that is something you can't do on your own; you have to get advice from everybody, experienced people. [F7]

However, family assistance was not restricted to couples who lived with extended family; extended family members were also very involved when the couple lived on their own. One couple, who had to be at work very early, dropped their son off at their parents' house so that the older generation could take the child to crèche. This was a crucial asset to the couple, as their work started much earlier than the crèche's opening hours and, without this arrangement, it would have greatly increased the complexity of their morning routine. Couples also talked about organising lift clubs with their adult siblings. Thus, parents and their brothers and sisters worked together so that they could accommodate each other's various work schedules. One family would drop off all the children and the other family would fetch them, especially when work started early or finished late.

Family assistance was also useful when parents needed some respite and marital connection (couple time routines). As with many of the other parents in this sample, one husband explained how his parents helped him and his wife to engage in these couple routines on a Sunday afternoon:

[Ons oudste kind] slaap, of hy gaan nou weer om na my ma'le toe. Dan is ons weer alleen. Dan kan ons 'n bietjie weer rus. [Wife interjects: Dis ons tyd.] Dit is hoekom ek sê ons is gelukkig dat ons families om ons bly. So as hy 'n bietjie van 'n hand vol raak dan kan ek hom gou om vat of my pa sal bel, “bring hom dat hy kom kuier daai kant”. Dat ons weer tyd vir ons self het, kan relax of whatever. [My vrou] vang op met haar soapies, of whatever. [F1]

All of the examples above reveal how the family network assists parents on a daily and weekly basis by supporting with various duties. However, this involvement sometimes is more substantial. In three cases, a sister or aunt would let the young parent's child stay with her for a month or more. This was so that parents could recuperate from a difficult pregnancy, or when a couple struggled to manage a satisfying Routine because of various family obligations and needs. One young mother, who had had her second child not long after her first, decided to let the firstborn stay with her sister in order to make their morning routine easier:

Maar omdat [my jongste seun] nog 'n bietjie klein is, hys maar nog net drie weke oud, en omdat dit nou soggens vroeg koud is en dit, het ek nou eerste besluit om [my oudste seun] nou eerste by my suster hulle te laat bly, en dat die creche nou nader aan [my suster] is. So, um, dis vir my 'n, 'n challenge om so vroeg vir [my kinders] te laat uit gaan. [F1]

In conclusion, many couples considered family “support” to be the “key” to coping. The extended family network is intricately involved in maintaining and sustaining the nuclear family's routines by reducing the complexity of their daily schedules, and taking over some of their many weekly duties.

#### 4.4.1.4 Intra-familial characteristics and competencies

##### 4.4.1.2.1 Couple cooperation and tag-teaming

When the parents described their sequences of routines, it was clear that they accomplished many of their tasks by working together and making use of tag-teaming. Many designed their daily Routine in such a way that, while one partner was occupied with a general domestic routine, the other would be undertaking a child-related routine. After that, the partners would swap and give each other turns to be involved in both childcare and domestic routines. By doing these routines simultaneously they completed the sequence of activities within the chosen temporal limits. All ten families described their sequences in this way. Most couples had a well worked-out tag-teaming schedule. For example, in family number one the husband would arrive home first and start to clean the house while his wife got some time for herself to visit siblings and parents. When she arrived home she would start the cooking routine, while he would take their son to play outside, or take him to visit grandparents and extended family. After dinner, they would swap again and she would have time to bond with their son, while he could use the time for some respite. This family (and four of the other families as well) described this kind of tag-teaming by labelling the designated times that each parent spends with their child as “our time”. Thus, when parent and child engaged in “our time” or “our thing”, the other parent got a bit of “me time” in which they could do something enjoyable on their own, or could perform some other needed routine. When asked what helped them accomplish their evening routines, this family said: “Ons altwee verstaan mekaar op daai punt: dis jou tyd, dis my tyd. Ja, so, dit speel 'n groot rol.” When asked how they managed to keep their evening routines going, another mother described their tag-teaming sequence during bath time: “I will put them in the bath and wash them, dad dries them off and dresses them. We compromise in the evening.” This mother emphasised the



compromising component, and then stated: “It’s a give and take. It really is.” Another father responded to this question by saying:

I think most nights we uh, we try (okay I’m lazy so I’m not gonna lie) but uh, we’ll give each other turns to do certain things. I’ll also cook you know. And then she’ll spend a bit of time with him, she’ll bath him. When she cooks then I’ll spend a bit of time with him. Because it *is* too much. [F5]

Similarly, one wife spoke about the support she gets from her husband over the weekend, which helped her to manage their weekend activities:

It helps that he helps me in the house and I don’t have to do everything on my own. [...] Because if I had to do everything on my own on a Saturday and he doesn’t have my back, and then the whole weekend is gone. So I love that my husband is very supportive. [F6]

In response to this, her husband jokingly replied: “They don’t call me dishwasher for nothing.” Many couples commented that working together “made the work lighter” and allowed them to finish with *essential* family routines so that they could move on to *desired* family routines:

Assisting each other, basically helping each other, as I said a family comes out of a husband and a wife, if you want to make it work you should help each other and also if we help each other then the quicker the work can get done and then you can spend doing whatever you want. [F7]

Tag-teaming and cooperation help couples finish with what they have to do and, as a consequence, help them get to the routines they actually desire to do. Thus, it seems that tag-teaming decreases the temporal incongruence experienced by families. The effectiveness and

benefits of this tag-teaming duo is corroborated by another couple and perfectly summed up by the following excerpt:

Hy sal maar altyd luister as ek vir hom sê “doen vir my dit en doen vir my daai”. Dan sal hy altyd vir my doen wat ek vir hom vra om te doen. As ek vir hom sê “ek gaan gou solank dit doen, dan doen jy solank dit”. [...] Hy’s altyd baie behulpsaam en deur dit te doen kan ons gouer in die bed kom en ons kan gouer by dit en by dat kom, daai ekstra wat jy nie behaal nie. Ons sal mekaar se hande ligter maak. [F9]

In this way, cooperation and tag-teaming reduce the temporal and task complexity of first-time parents’ sequence of routines.

#### 4.4.1.2.2 Planning ahead and pre-empting the future

Several families stressed that planning ahead helped them to accomplish their sequence of routines, as one mother and father both stated: “Ja, net goeie planning.” One method of planning was for the couple to make regular contact throughout the workday via phone calls, e-mails or cell phone text messages (sms) so that they could negotiate their schedules, strategise about who has to do what after work, plan meals, and plan for evening and weekend routines. This was done by nine of the ten couples. Furthermore, two mothers demonstrated their planning skills by describing how they prepared for their mornings the night before (e.g. getting children’s clothes ready). One of the husband’s commented: “Well I think it’s easy because she does most of what she is supposed to do the night before. So it just makes it a lot easier [5].” This mother also emphasised that she had a time schedule in the morning that she worked from. She would even pre-empt possible problems that she might encounter with her son and worked these into her time schedule: “But it’s also that I work on a time. Because I know I’m gonna struggle with him so I’ll wake him up 15 minutes before what he is supposed to so that I get everything in.” Pre-empting future problems was also

important in terms of going to sleep in the evening. Thus, going to bed at the appropriate time helps parents to manage their routines better in the morning: “En ek dink dit is ’n kwessie van die regte tyd gaan slaap ook. Nie te laat wakker is nie. Gaan slaap sodat daar nie probleme is as jy opstaan die volgende oggend nie.” One father, who had flexible work hours, stressed that, when planning the day’s schedule, “You need to first see what time you would like to be done and then work yourself backwards”. He demonstrated how he planned his time schedules:

So if I need to get [my wife] at 4:30 I must arrive [at work] at say, like the latest 7:30 because then you’re able to leave at 4:00 to pick [your wife] up at 4:30. So you can work it back to say, okay I’ll leave the house at 6:00. It takes me roughly an hour to get to work you know, so 7:00. (I shouldn’t aim for 7:30 I should aim for 7:00 to get there 7:30 eventually). And you work back and say right I must get up at 5:00. You just, if something should happen in the morning. [F6]

Also, one mother felt that procrastinating with daily tasks is problematic because, if something unforeseen happens, it increases the challenges one faces. Doing it immediately gives one some leeway:

Nee, is maar die ding, my ma het altyd gesê: “doen ’n ding terwyl jy kan, jy weet nie wat môre vir jou inhou nie” en dis maar dieselfde met jou kinders. Doen ’n ding nou, jy weet nie wat netnou kom nie. As jy nou dit wil gedoen het, doen dit en kry klaar. Netnou stamp die kind jou of hy kry seer, dan moet jy hospitaal toe, dans daar ander faktore, dis ander goed wat verkeerd gaan. [F9]

Thus, planning ahead and pre-empting future problems helps parents to reduce the complexity of their tasks and time schedules, and helps them adhere to their sequence of routines.

#### 4.4.1.2.3 Sticking to the sequence and temporal structure of the routines

By adhering to the sequence of their routines and their temporal structure, family members become used to their schedule and this made it easier to maintain their family routines. Children and parents fall into a pattern and become familiar with a set rhythm. For instance, one mother explained that when they do not adhere to their routines, their child's behaviour becomes difficult to manage, or he becomes confused with their temporal structure. This disrupts the whole sequence and "throws everything out". Thus, they felt it was better for their child if their Routine varied as little as possible:

Dit gooi alles uit. So, um, om liewerste 'n kind by 'n Roetine te hou is beter as om, om heeltemal uit te gooi. So, dit het vir ons verander. So, hoe meer ons by die kind se Roetine hou, hoe beter vir die kind eintlik. En dit is wat ons van geleer het. [F1]

Thus, children were seen as more compliant and easier to handle when they were used to the structure and time schedule of routines. Another mother also emphasised this and explained that her child had been familiarised with the morning routine from a very young age, which helped him "get into it":

Ons is al in daai roetine. Ons sukkel nie eintlik om vir [my seun] wakker te kry nie. Nou sal hy nog, ek moet hom nou eers 'n bietjie vir hom hou of whatever, maar hy is ook al in daai in so jyt nie nodig, vanoggend wil hy sommer 'n bietjie laat lê of whatever nie. So hy is al so gewoond aan daai roetine net omdat hy as kleintjie ook al in daai roetine is. [F2]

There was the sense that adherence to the set of routines made behaviours more automatic, and even parents could accomplish tasks as if they were a reflex. There was no need to think or discuss what activities were required. As one father stated: “It’s automatic, you don’t ask. [F9]” His wife replied that they were so used to their daily routines that “it’s almost like you *know* what your duty is: you do *this*, and you do *that*.”

When a family settles into a daily Routine and sticks to it, the regularity and consistency ensure that tasks do not still need to be allocated or negotiated. When there is stability in a daily schedule of family routines, partners can function on autopilot. Furthermore, this stability helps parents regulate their children’s behaviours. Thus, the family’s familiarity with the daily sequence of routines helps smooth over its day-to-day implementation and, in essence, reduces the task and temporal complexity.

#### 4.4.1.2.4 Characteristics and skills of individual family members

Two couples spoke of their child’s temperament as having a positive influence on their routines. One couple stressed that their son was very complacent when it came to their routines: “Gelukkig is [my seun] nie een wat.... As ek gaan lê dan gaan hy ook lê. Hy sal nie nog aan wil speel nie. As die ligte af is dan sal hy gaan lê” [F2]. The other couple has two boys and they emphasised that their youngest was particularly useful in preserving their family routines because he ensured that they stuck to their sequence of family activities and time schedules. Rather than just be complacent and easy to manage, as in the example above, this child was much more pro-active in managing the family’s sequence of routines and was even described as their “alarm clock”. The father explained:

I think it would be [our youngest son]. [He] is so into the Routine it is *built* into him. He actually reminds you if you forget something. He will come and remind you when it’s time for this, it’s time for that, you need to do this. [F4]

His wife agreed:

We'll slack and won't have a lunch-lunch, but *he*, you can't do that with him. [Father affirms: He needs to sit down.] He needs to sit down and eat. He needs to do this. He keeps *us* remembering that there is something like a Routine. Because over the weekend we actually, we'll still do it, but not, like I said, not as demanding as during the week. But he still keeps you in that same Routine: "Mommy I must get my yogurt now". And I'm like: "Okay *fine*". [F4]

Besides child temperament that assists parents with their routines, some parents also seemed to possess certain competencies and character traits that helped them accomplish their family routines. Some partners seemed very structured and organised and liked to adhere to schedules and plans:

Look for me it's just the individual I am, you know and you can ask [my wife] I like things to run to a schedule. I like, determine a path. I don't like things determining how my day goes. So I like to determine how things go. It's just, maybe I'm just an individual, I stick to certain ways but that's the way I am. [F6]

The mother from family nine compared herself to her husband, whom she felt did not adhere to their routines as well as she did because she aimed to finish a task immediately, whereas he tended to delay and procrastinate: "Ek hou van 'n ding doen as jy hom moet doen. Ek sal altyd vir [my man] sê "luister as ek praat, doen dit nou." The couple explained that the husband would leave childcare tasks until it was too late, such as dressing children before they fall asleep, but his wife kept things in check. The mother from family three also seemed very time-orientated and had a strict schedule that family members must adhere to during the week. She explained that she was responsible for implementing their weekday routines: "I'm a very prim and proper person. I have to get up a certain time." Her husband confirmed by

saying that “everything must be in the right place”. She added, “yes, everything must be on. [...] I have a big obsession or something like that, but, if I have to learn to get up at half past six, I *get up* at half past six”.

The competencies and traits mentioned above relate to individuals’ ability to create and adhere to time schedules, thus they point to their proficiency in time management. In addition to this, having the skills to successfully cook or clean or manage children also helped parents manage their routines (n = 3). For example, one impressive father seemed very skilled in accomplishing tasks and managing their family’s many routines. This father does shift work and holds down a second job on his off days. When he gets home in the mornings he first catches up on sleep and then gets up before his family arrives in the afternoons to do some cooking and cleaning. He is also responsible for childcare duties in the mornings. When asked about their routines during the transition to parenthood, he said:

It’s not a problem because I, I grew up with my grandmother and there I helped raise some younger ones. It is not something new to me. I can do everything. I can cook. I can do everything. I’m a soldier so I can do everything. It’s not a problem. [F3]

Thus, certain family members seemed to have particular traits, personal characteristics or skills that assisted them in accomplishing tasks, helping others accomplish tasks, or helping the family to adhere to time schedules. These competencies and characteristics reduced the temporal and task complexity of the family’s sequence of routines.

#### 4.4.1.2.5 Sense of commitment and responsibility towards each other – “Jy moet dink aan jou huisgesin”

When asked about how the transition to parenthood affected their family routines, parents described big adjustments to their routines and often talked about the fact that they could not

do what they wanted anymore. However, these statements were often followed by an acknowledgement that, as parents, it was their responsibility and that they were dedicated to each other. Often, when parents spoke about relinquishing their own desires, they added that they did so for the sake of the family and that these sacrifices were not experienced as negative or problematic because of their sense of responsibility and commitment towards each other. When one mother was asked what helped her maintain the family's routines, she said: "I think just knowing the fact that it is important to have that bit of time with my son" [F6]. In response to this same question, a father stressed family connection and their commitment towards each other: "Ag, [me and my wife] are in a relationship, so everything turns around the other person, or, especially. So whatever your problem is, that is mine, because you can't consider yourself at this stage. You are not alone in the thing" [F1]. This excerpt shows this father's realisation that his life affects his family's lives. This realisation motivates a person not to be egocentric ("you can't consider yourself at this stage"). Family three, who manage a very demanding schedule, spoke about the *will* to make their family life succeed. The mother stressed that she knew her husband had the option of socialising with friends rather than spending time at home, but because they had the will to make it work, they found time to spend with each other. She continued:

But the funny thing with that is, with our side is (because I know a lot of times, with a lot of cases you do find that people say: "No my husband is working shifts and we never see him"). But I think if you *want* to make it work it *can* work. Because like, for instance, today, um, he was off, but we get to spend the evening together. So it's not like it *can't* work. It can work if you *want* to make it work. [F3]

Note here that it is the commitment and desire to have a successful family life that motivates them to invest time in family routines. Similar to this, another young mother stressed that the



transition to parenthood meant that she could not consider her own needs, and that the needs of her children always came first. In the following excerpt it is clear that she experienced a sense of responsibility and commitment to her family and that these sacrifices were seen as part of her job as parent:

“Mommy” and “daddy” *every, five, seconds*. Wish we could change our names. That’s all you hear. You don’t hear anything else. But I suppose it will change over time. It’s obviously just a learning curve as you *are* a parent. That is your responsibility. That comes first. And you don’t neglect one another. [F4]

The mother of family five had similar sentiments, saying: “For me it’s fine because I feel, my take on it is, um, if you have a child then your lifestyle has to change.” Thus, couples recognise that becoming a parent means that one will have to make sacrifices and relinquish desires that one had prior to the transition, because of one’s new desire to care for one’s child. Parents experience a change in focus and mindset:

As ’n mens kinders het besef jy, jy is nie meer, dit gaan nie meer oor jou nie. Jy het ’n ander soort liefde wat jy wil uitstort op jou kinders en om verskillende goedjies te doen met hulle. [F9]

In conclusion, it seemed that the bond between family members, the parents’ sense of commitment and responsibility, and the desire to care for one another were a strong source of motivation, helping parents to sacrifice their previous desires and maintain their current sequence of routines.

#### 4.5 Themes Relating to What Accommodations First-time Parents Make to their Routines in Order to Adapt to the Arrival of their Child

The last research question directing the study was: *What accommodations to their routines do first-time parents make to adapt to the arrival of their first child?* Two themes were generated during the data analysis: *temporal accommodations* and *the idiosyncratic nature of family accommodations to routines*. These themes will now be discussed.

##### 4.5.1 Temporal accommodations

Because of the added childcare duties that need to be “squeezed into” the couple’s previous sequence of routines, all the parents mentioned adjustments to their temporal structure and said that they had to make accommodations to *time* so that these new routines could be assimilated ( $n = 10$ ). The parents had also become more time conscious and thus enforced their temporal structure more adamantly because they recognised the benefits of sticking to a child’s Routine (discussed in Section 4.4). These time adjustments include waking up earlier, going to bed earlier, coming home earlier from functions or parties, adhering more to the set times of a routine and also increasing the speed with which parents do tasks.

For instance, most parents reported getting up earlier in order to increase the amount of time available for tasks in the morning. The mother of family nine commented: “For me, it’s gone into my sleeping time, [laughter] because then I have to get up earlier to get [my son] done and, so, for me I think it is just more. That is the most significant thing.” Other families described similar events, with the father of family two saying: “Jy moet nou ’n bietjie vroeër opstaan. Dit is waar ons moes aangepas het.” His wife explains:

So dis nie net die lunch box of whatever jy moet in sit nie. Dis maar die bottels wat jy moet maak, kleertjies wat jy moet in sit, al die goed. En alles moet jy double check of jy ingesit het vir die dag. So hy moet nou ’n bietjie, net ’n extra, vroeër opstaan. [F2]

Another mother explained how she had to rework the timing of her entire sequence of routines so that she could fit in the extra duties required by the child:

Yes, if you want to go out you have to get up extra early in order to prepare [your daughter] to go with because you always have to think of her as well. So we need to plan in advance, we have to prepare ourselves in advance, whereas you had to get up for work early, like get up an hour earlier, now you have to get up two hours or three hours early, whether we have to go to church or whether we go out we have to get up two hours earlier in order to prepare ourselves to make that appointment. If your appointment is at 10 o'clock you have to get up maybe 7 o'clock, whereas if she hadn't been there maybe 9 o'clock or 8 o'clock, so that's how it is. [F7]

Other parents ( $n = 4$ ) stressed that they come home earlier from outings for the sake of sticking to the temporal schedule of routines. This pre-empts potential problems with the child, because the couples have realised that when they do not adhere to their child's schedule and Routine, the child becomes difficult to handle (tired and nagging), or confused by the disruption in time schedules. Three parents also talked about increasing the speed with which they do things to accommodate the new tasks. The father of family four commented: "My routine was: get up, go to work, come home. You take your own time. You don't have to rush. Now, I need to rush." Thus, in order to accommodate their child and their child's new sequence of routines, parents make adjustments in time by either changing the times when they do certain activities, becoming more time orientated and sticking to these times, as well as altering the speed with which they perform certain tasks.

#### 4.5.2 The idiosyncratic nature of accommodations to routines

Families took different and sometimes very creative actions to achieve their multiple objectives and to adjust to their demanding new schedules. Although these were not similar

in content, they were all changes that were specifically made to adapt to the families' unique set of circumstances. Thus, these changes point to the idiosyncratic nature of accommodations to routines. Table 4.5 lists these idiosyncratic accommodations found in the data.

Table 4.5

*Idiosyncratic Accommodations First-time Parents Make to Their Routines in Order to Adapt to Their Child*

Family routines	Specific idiosyncratic accommodations
Family outings	<ul style="list-style-type: none"> <li>a. Going to age-appropriate places for children which adults can also enjoy.</li> <li>b. Letting one parent go to an event while the other either stays at home or does other enjoyable activities with the child.</li> <li>c. Changing one's circle of friends and decreasing social contact with friends who socialise in child-unfriendly environments.</li> <li>d. Becoming friends with the parents of your children's friends and using these times as socialisation opportunities.</li> <li>e. Using shopping as a mother-child bonding experience ("it's our thing").</li> <li>f. Taking child with to parent's weekly church choir practice.</li> <li>g. Taking child with to visit family as opportunity for parents to have social contact and child to play with cousins.</li> </ul>
Television watching	<ul style="list-style-type: none"> <li>a. Making sure that whatever the family watches, they watch together (family bonding opportunity, as well as time to unwind).</li> <li>b. Using television as a tool to get child to fall asleep.</li> <li>c. Watching television programmes and advertisements as father-child bonding routine ("it's our thing").</li> <li>d. Using television as a tool that preoccupies child so that parents can accomplish other tasks, such as cooking or couple bonding.</li> <li>e. Get multiple television sets, one for each bedroom, so that parents can watch age-restricted television programmes and child can still be entertained by age-appropriate shows.</li> </ul>
House cleaning and domestic task routines	<ul style="list-style-type: none"> <li>a. Doing ironing and washing early in the morning so that parents can take comfort in the fact that tasks are complete and thus can focus on enjoyable activities for the rest of the day.</li> <li>b. Cleaning on Saturdays when children play with neighbour's children.</li> <li>c. Singing the Barney Clean-Up Song to get children involved in domestic tasks.</li> <li>d. Getting a nanny to help out in the house so that couple has more time with children and for each other.</li> </ul>

*(Table continues)*

Table 4.5 (*continued*)

Family routines	Specific idiosyncratic accommodations
De-stressing routines	<ul style="list-style-type: none"> <li>a. Walking and window shopping during lunch hour break.</li> <li>b. Arriving early at work to prepare self mentally before the onslaught of work duties start.</li> <li>c. Bathing in morning before everyone wakes up (“to settle myself for the day”).</li> </ul>
Couple bonding routines	<ul style="list-style-type: none"> <li>a. Phoning each other at work to communicate in response to little quality time available when they are at home.</li> <li>b. Waiting for children to be in bed to catch up on the day’s events.</li> <li>c. Date night once every few weeks while grandparents take care of children.</li> <li>d. Driving together to work as an opportunity to spend time together and communicate.</li> <li>e. Cooking together as opportunity to communicate.</li> <li>f. Organising a weekend away twice a year while children stay with grandparents.</li> </ul>
Grooming routines	<ul style="list-style-type: none"> <li>a. Doing one’s hair and make-up at the office before co-workers arrive to adapt to lack of time.</li> <li>b. Dressing child in the morning while still asleep to compensate for behaviour problems.</li> <li>c. Putting clothes ready the night before.</li> <li>d. Using grooming routines (brushing teeth) as special parent-child bonding experience.</li> </ul>
Cooking routines	<ul style="list-style-type: none"> <li>a. Involving child in cooking activity as a mother-child bonding experience.</li> <li>b. Cooking dinner with grandparents.</li> <li>c. Cooking parts of the dinner the night before.</li> <li>d. Taking Friday nights off from cooking and getting takeaways.</li> </ul>
Bedtime routine	<ul style="list-style-type: none"> <li>a. Having “quiet time” before bed in which children can draw or play softly.</li> <li>b. Lying in bed and using this as opportunity to bond with child and communicate.</li> <li>c. Having special rituals such as rubbing child’s back before bed.</li> <li>d. Letting more skilled parent put children to bed.</li> </ul>
Weekend routines	<ul style="list-style-type: none"> <li>a. Using one’s weekends to accomplish all the desired activities that one does not have time for during the week.</li> </ul>

Table 4.5 shows that there are unique accommodations within certain types of family routines (family outing routines, television watching routines, house cleaning and domestic task routines, de-stressing routines, couple bonding routines, grooming routines, cooking routines,

bedtime routines, and weekend routines) that help the family adapt to the transition to parenthood. These changes suite their unique circumstances. For instance, one mother keeps her make-up and hair straightener at the office, and thus finishes her grooming routine at work before her colleagues arrive. She does this to compensate for the lack of time she has at home. Another couple decided to use a basic tooth-brushing routine to bond with their boys because they have such little time for family bonding. In terms of household tasks, this same mother uses a well-known children's television character (Barney the Purple Dinosaur), which has its own clean-up song, to get her young boys to help her clean their rooms. Parents also have different de-stressing routines, especially if they have very demanding schedules. One father gets up at 5 o'clock, before everyone else wakes up, so that he can relax and de-stress in the bath, whereas a mother uses her lunch break to walk around, window shop and relax by herself.

In terms of couple maintenance routines, one couple often phones each other at work to make up for a lack of quality time at home. The mother explained: "The only time we actually speak is if [my husband] takes me to work, or when we come home, or a bit in the evening. [...] But during the course of the day we try and find time, during my lunch hour, or his lunch hour, to actually just catch up." On the other hand, a different couple liked to use their cooking time to catch up and talk about the day's events.

Another interesting accommodation related to social contact. Although research reveals how parents often experience a decrease in social contact after the transition to parenthood, one couple emphasised that having children helped them *increase* their social contact because they became friends with the parents of their children's friends. Thus, when their children had play dates, they used these times as an opportunity for social engagement, something they struggled to do prior to the birth. On the other hand, another couple decided to decrease social

contact with old friends who did not share the same kind of lifestyle anymore and who did not socialise in child-friendly environments. The couple believed that this was adaptive because it helped them focus more on family life and they could use that time to build strong and healthy family relationships. This was not seen by the couple as a negative lifestyle change.

Thus, parents selected behaviours that worked for them from a wide variety of available options. They restructured their routines in unique ways so that they could try to manage this normative life transition successfully.

#### 4.6. Conclusion

This chapter presented the results of the data analysis and looked at the various overarching categories, sub-categories and themes that answered the research questions best. The chapter was divided into five sections, each addressing one of the research questions on family routines during the transition to parenthood. The inductive grounded theory techniques helped to generate new information on family routines. These findings are discussed in the next chapter.

## **CHAPTER FIVE**

### **DISCUSSION, CONCLUSIONS, LIMITATIONS AND RECOMMENDATIONS**

The broad aim of this qualitative study was to gain a better understanding of family routines as a resilience resource in the lives of Coloured, first-time South African parents, residing in a northern suburb of Cape Town. It centred on what family routines look like during this family life cycle transition. It also looked at what variables might hinder or help the family manage this resilience tool. To further understand this family resource during the transition to parenthood, the study also looked at what accommodations parents make to their set of routines to adapt to the arrival of their child. The first section of this chapter discusses the answers to these research questions by integrating the already existing body of literature on family routines with the findings presented in the previous chapter. This is followed by conclusions that could be drawn from the research. The chapter will close with the limitations of the study and thus give directions for further research in the light of these limitations.

#### **5.1 Discussion**

In this section the results will be discussed with regard to the extent that they answer the five research questions. The discussion will follow the same sequence as the reporting of the results in the previous chapter.

##### **5.1.1 What Family Routines Look Like in the Lives of First-time Parents**

The central focus of the first research question was to elaborate on theory concerning what family routines look like in the lives of first-time parents. Because researchers have different opinions concerning what a family routine is, and because there is no existing literature on the family routines of South African parents, it was felt that asking this broad research question could generate new ideas. What became evident was not so much what kind of



specific routines these families follow, but that Coloured, first-time South African parents who reside near Cape Town design their families' set of routines into a specific sequence, a sequence that fits into a particular temporal structure. The recognition of this structural design also revealed what it looks like when family members progress through their set of daily routines. Furthermore, what this structure looks like has a lot to do with the functionality of the design. Lastly, this question revealed that the central concern regarding this sequence and temporal design is incongruence between the parents' ideal sequence of routines and the amount of time they have available to engage in these family routines. Each of these themes will now be discussed.

#### 5.1.1.1 Sequential unfolding of routines that are situated within a temporal structure

Looking at the first theme, family routines are not always described and experienced by first-time parents as separate, isolated moments that are suspended in time. They **unfold, one after the other, in a set sequence or pattern** and, as the family progresses through the day, they are aware that they need to complete one activity before the next one in the sequence can be initiated. These activities are also intricately connected to time, and families are acutely aware of the **temporal structure surrounding their daily routines**. Thus, parents are aware that each task has to be commenced and completed during various time frames throughout the day. These two sub-themes are interesting in that they may highlight the important role the entire daily schedule plays, rather than the role individual routines play during the transition to parenthood.

In Chapter 2 I spoke about researchers' inconsistency when using the term *routine*. Some (Fiese et al., 2002; Howe, 2002; McCubbin & McCubbin, 1996) use the term routine when they refer to one of the many available activities that families habitually engage in (e.g. a bathing routine versus a dinner routine), while other theorists (Gallimore et al., 1993;

Weisner, 2002a, 2002b; Weisner et al., 2004) use the term to refer to the sum total of these activities that are structured into a daily schedule. For the sake of clarity I proposed using the word *routine* (without a small *r*) to refer to the individual activities and the word *Routine* (with a capital *R*) to refer to the daily schedule. The two sub-themes in this section seem to relate to this second use of the term, namely the daily Routine. This is because, logically, a daily Routine is most likely made up of two constituents: (1) a collection of individual routines and activities that are structured into a set sequence and (2) a time schedule or temporal structure within which those individual routines should take place. Thus, what this section emphasises is the importance of not ignoring the influence and design of this daily Routine, because the sequence and temporal structure affect how these families experience each individual routine. For example, if a parent has an unsatisfying, jam-packed daily schedule it could greatly affect how that parent experiences a morning breakfast routine.

While it is clear from first-time parents' descriptions that time is one of the central elements involved in their routines, it seems rather discounted by prominent researchers investigating family routines. Although Howe (2002) mentions that routines often occur with cyclical regularity, there is a lack of emphasis on the importance time plays in the overall experience of the routine. Because routines are not isolated events suspended in time, but form part of an overall design, first-time parents are often aware of the temporal limits they have when engaging in a routine and realise that the interaction must be completed so that the next routine in the sequence can begin. In a 50-year review of family routines and rituals, Fiese et al. (2002) also fail to mention the centrality of time. Fiese et al. (2002) emphasise that family routines are signifiers of the family's level of organisation. Yet there is little explanation of the various constituents of this type of family organisation. Nowhere in the review was the sequence or temporal structure mentioned as a key element in how routines are organised by families, and how time affects the experiential qualities of family routines. Similar concerns

can be raised about the Ecocultural Model (Gallimore et al., 1993). Weisner and colleagues (Gallimore et al., 1993; Weisner, 2002a, 2002b; Weisner et al., 2004) recognise that specific types of routines (activity settings) are structured into a daily schedule. However, they also mostly overlook the major effect time has on these activity settings. When looking at their conceptualisation of the activity setting construct (which according to the model has various objective features, such as the people, tools, places and behaviours involved, as well as subjective features like cultural values and motives), the discussion of how and why families choose the timing of activity settings is absent (Gallimore et al., 1993). Time has both quantitative and qualitative dimensions (Tubbs, Roy & Burton, 2005) and thus can affect both the objective and subjective features of activity settings. Baldock and Hadlow (2004) postulate that the greatest obstacles modern-day families face are problems related to *scheduling*. They borrow the term *scheduling* from the language of management science. It refers to the process of creating a satisfying work timetable by getting a complex set of productive resources to work together in such a way that they consistently and effectively produces desired outcomes (Baldock & Hadlow, 2004). In the case of first-time parents, the resources are the parent's time, money, skills and energy, as well as extra-familial resources like relatives and day-care centres. The desired outcomes could be various material and sustenance goals, as well as long-term developmental and relational goals (discussed in Section 5.1.2). Baldock and Hadlow (2004) believe the challenge is thus for parents to create and design a daily schedule that allows them to reach all of their short- and long-term goals. When it comes to the study field of family routines, researchers should not ignore scheduling processes by only analysing specific family routines in isolation from each other. By looking at the more general processes involved in scheduling, it could help to reveal how the entire schedule's structural design (and families' perceptions of the functionality of that design) can affect adaptation after the transition to parenthood.

5.1.1.2 Specific sequence and temporal structure is designed to be functional: “It works for us”

Secondly, families in this study insisted that they had specifically **designed this sequence and temporal structure so that it was more or less functional** for them. Families in this study insisted that no other design would “work” for them at this stage in the family life cycle. They believe that no activity can be added or taken away from the sequence. Even if they desire other activities (such as a breakfast routine), they feel the addition of these activities would incur changes in the rest of the sequence, and that these changes (like getting less sleep) would be even less desirable. Their insistence on functionality seems to resonate with Weisner et al. (2004), who state that every family must structure for themselves a functional family Routine in order to adapt to their cultural and ecological surroundings. Families proactively construct their family ecology and routines, and thus they shape the cultural, social, ecological and economic world around them, but there is a reactive element and therefore they, in turn, are also shaped by these environments (Janhonen-Abruquah, 2006). This reactive and proactive structuring is of concern here: in some of the families in this study, their design seemed more reactive than proactive (Weisner et al., 2004), with some parents mentioning they “don’t really have a choice” in the matter. Many families used the phrase *it works for us*, however, there seemed to be a discrepancy in their understanding of the meaning of the word *works*. How does one define functionality? Is a sequence of routines functional when the family *cannot* add or remove anything from the design, or when they do not *want* to remove or add anything? *Cannot*, which was used by some of the families in this study, implies a degree of subjection and lack of control. Thus, it seems that some of these first-time parents structure their sequence as best as they can, despite their health, work and economic situations. A level of reactive functionality also makes sense in the light of the third overarching theme – temporal incongruence. Even though families felt their design worked

for them, many first-time parents seemed rather unhappy with certain aspects of their sequence, especially the scarcity of time. However, whether reactive or proactive, the design as it is still allows these first-time parents to achieve many of their desired relational and instrumental goals (although not all). Every routine in the sequence has a specific place, order and time, and this has an effect on the rest of the sequence. This is especially evident when there is disruption in the sequence. When one activity does not go as planned, or is not completed in the allocated time frame, it derails the entire routine and dramatic action needs to be taken to regain control of the schedule and to accomplish all the required daily routines. Parents often talked about how everything in the day is “thrown out” when they are not able to stick to their sequence, and that the schedule was there in order for them to “get happily through the day”. Thus, again it is not only important for clinicians and researchers to ascertain what types of routines families engage in, but to look at whether their entire structure is working for them. Also, to what degree is the schedule reactively or proactively designed, and how often do families have to deal with disruptions in their sequence?

#### 5.1.1.3 Temporal incongruence

Even though the parents had some sense that the routine was working for them, it was very evident that families experienced a discrepancy between the ideal sequence of family routines they envisioned and the amount of time they had available to engage in this ideal sequence. This **temporal incongruence** not only means that families do not have time for certain desired activities, but also that they experience the routines they do engage in as rushed and chaotic. Temporal incongruence seems to echo aspects of the term *time starvation*, which is when individuals feel there is a deficit in the amount of time available to engage in meaningful life activities (such as building relationships with children), causing them to experience distress and emotional discomfort (Tubbs et al., 2005). When it comes to building and protecting family connections, time is an essential ingredient and has been described by

some researchers as a valuable family and health resource (Baldock & Hadlow, 2004; Strazdins et al., 2011; Tubbs et al., 2005). The quantity of this daily resource has remained constant over the years (always 24 hours), yet what has changed are people's social and cultural values, affecting which life domains (work, family, social, etc.) receive priority when allocating time (Daly, 2001; Tubbs et al., 2005). In this study it seemed that various factors increased the temporal incongruence a family faces, such as work-related factors, transport difficulties, or child-related difficulties (see the discussion in Section 5.1.3).

Clinicians supporting first-time parents should take into account how much time a family has available to them. Researchers specifically investigating family routines tend to ignore how time constraints could affect the ability of the family to construct an ideal set of routines that allows them to engage in *all* their desired activities, not just some. This failure to recognise the importance of time can easily be seen in the few available instruments that measure family routines, such as the Family Times and Routines Index (FTRI), developed by McCubbin, McCubbin and Thompson (McCubbin & McCubbin, 1996), and the Family Ritual Questionnaire (Fiese & Kline, 1993). Both instruments measure family routines as isolated events and ask participants whether or not they engage in certain specific family activities (e.g. does the family have dinner together on a regular basis?). What none of the available instruments assesses is how the sequence structure and time (or lack of time) affect the *experience* of the interaction during routines. The instruments miss the possibility that parents might engage in a certain routine, but that it could feel rushed, chaotic and brief because of the realisation that various other routines in the sequence still have to be accomplished. The parent may feel unhappy with the routine because there is not enough time to adequately connect with other family members, or the parent might feel unsatisfied with how effectively tasks are accomplished. These psychological instruments should thus also address issues of temporal incongruence. Furthermore, these instruments look at the

importance parents place on only a few predetermined routines (e.g. does the family eat dinner together?). However, individual families may place value on other routines that are not covered, such as religious activities. Thus, clinicians and researchers should rather assess whether the family feels they engage in their *own* ideal sequence of routines. These are all important variables that can affect a family's overall satisfaction with the Routine and may affect whether the Routine is adaptive and sustainable (Weisner et al., 2004).

### 5.1.2 Why Family Routines are Important to First-time Parents

The second research question was: *Why are family routines important to first-time parents?* This question relates to the fundamental definition of a family routine. In Chapter 2 I questioned, on a theoretical basis, whether the distinction between routines and rituals is as straightforward as Fiese et al. (2002) propose. In support of my critique, the results of this research revealed that family routines are not only spaces in which instrumental communication takes place. Firstly, they are opportunities for families to spend time together, in other words, family time. This was the first overarching theme. This overarching theme had two sub-themes, because spending time together gives families the opportunity to (1) foster connections with each other and (2) gain meaning in life. Secondly, family routines are opportunities for ensuring optimal child development, which was the second overarching theme. This theme also had two sub-themes, because routines (1) ensure the developed of more routinised (structured, timely and scheduled) children and (2) ensure that parents expose children to other desirable competencies and values. The discussion that follows elaborates further on the theory of Fiese et al. (2002) and Howe (2002) in the light of these new findings.

As discussed in Section 2.4.1, Howe (2002) proposed that each routine is an activity directed by a communal practical goal and that different routines are distinguished from each other by

the different goals they serve. From Howe's description it became evident that what he described as goals are, more specifically, instrumental goals. I use the term *instrumental goal* to denote the practical and most basic, primary need the routine accomplishes (e.g. a washing routine is for hygiene purposes, or a dinnertime routine is for sustenance). Thus, it also relates to the hypothesis of Fiese et al. (2002) that family routines are distinguished from family rituals because routines focus on instrumental communication, which tells family members what they should *do* as a group, whereas family rituals focus on symbolic communication, which conveys a set of meanings "that extend beyond the particular task of the moment" and tells family members something about who they *are* as a group (Howe, 2002, p. 439). Thus, in essence, Howe (2002) and Fiese et al. (2002) focus their attention on the task-related characteristics of routines and emphasise that family routines are tools ("instruments") that allow the family to get certain daily jobs done. Based on conclusions drawn from their definition, I thus expected to find that first-time parents would at least occasionally cite these instrumental goals as reasons to why a specific routine is important. However, throughout the interview process families very rarely cited instrumental reasons to explain why a routine was important to them and it was thus not selected as a theme. For example, only one parent made a brief statement that a breakfast routine was important because it ensures they eat before leaving the house. Another parent mentioned that getting dressed in the morning was to get ready for work. Yet, even these rare instances were frequently followed by a much longer discussion of the secondary goals the routine fulfils. These secondary goals are more long-term, symbolic, meaningful and consequential in terms of the family's emotional and developmental well-being and thus extend far beyond the task at hand.

Initially there was a fear that these types of responses were elicited by using the word *important* during questioning. However, the parents mentioned these secondary benefits even when the word *important* was not used during questioning, and they also came to the fore



when the parents were probed by asking questions about the *goals* of a routine, or what the *consequences* would be if the routine was not enacted. Thus, it did not seem that their responses were a consequence of the specific wording of the interview questions. It was also thought that these results might have been due to the intrinsic nature of the interview process. Interviewees could feel compelled to give responses that they think would please the interviewer. It is possible that family goals, like connecting with each other or developing the child, might be more prominent in the minds of parents as these experiences carry more meaning. Instrumental goals might not be deemed as meaningful enough. As a consequence, the interviewees might think discussions of child development and building family connections are more pleasing for the interviewer. However, even if this was the case, it still brings into question the hypothesis that there is a clear distinction between routines and rituals. Although there are everyday duties that need to be performed and tasks that need to be fulfilled during routines (washing, cleaning, cooking, etc.), families structure them in such a way that they are convenient sites to connect with each other, create some sense of meaning in life, cultivate various family values, and establish long-term competencies in children. Advocates for the hypothesis proposed by Fiese et al. (2002) could argue that what was analysed by the current study possibly was family rituals and not family routines. However, the argument remains that most of these patterned family interactions include *both* practical, instrumental actions as well as emotional, symbolic and developmental communication.

This finding is corroborated by various other qualitative studies. For instance, in terms of fostering relational connections and symbolising group membership, routines can be just as powerful as rituals. It has been found that family rituals (such as birthdays, weddings, funerals, or religious holidays like Christmas) are strong symbolic tools used to communicate who may belong to the family group and who accepts their group membership. Oswald (2002) especially found this form of communication in rituals when it came to showing gay

and lesbian family members whether they were accepted or rejected as members of the family, by either including or excluding them from important family events such as weddings. In the current investigation, the data analysis highlighted that this is also the case with basic daily routines: one parent mentioned that without everyone engaging in their family cooking routine they would no longer be a family, they would just be separate individuals. Thus, engaging in routines together symbolises their connection and belonging to the unit. A mother emphasised that their family evening routines were important because they allowed them to build connections with their child and show him where he “belongs”. But family routines are more than merely a symbol of group membership. The very core of the definition is that it is a patterned family *interaction* (Wolin & Bennett, cited in Fiese et al., 2002). Thus, by definition, it is time spent with one another that creates the perfect opportunity for parents to connect with each other and connect with their child.

In terms of this interaction and connection it seems that the concept of family routines incorporates aspects of two other types of family phenomena, namely Shaw and Dawson’s (2001) concept of *family purposive leisure*, and *family time* as analysed by Tubbs et al. (2005) in low-income families. Firstly, we look at family purposive leisure. According to Shaw and Dawson (2001), the current definitions of individual leisure, described by past researchers, fall short of the actual meaning and experiential qualities of family leisure (Shaw & Dawson, 2001). Individual psychology holds that leisure must be freely chosen, intrinsically motivated and enjoyed by the participant, but this is not applicable to family contexts, as the leisure activities of parents with young children are often not freely chosen by the parents because they centre around child needs rather than parental desires, are often not intrinsically motivated but goal orientated, and may not always be enjoyed by the parents (Shaw & Dawson, 2001). Thus, when it comes to family leisure it is more appropriate to use

the term *family purposive leisure*, which is planned and facilitated by parents to reach various goals. Shaw and Dawson's (2001) research elaborates on what these various goals are:

One set of goals seems to relate to enhanced family functioning, including improved interaction and communication among family members in the short term, with the long-term goal of family cohesion based on a strong sense of family unity. Another set of goals, as indicated by this study, refers to teaching children about healthy lifestyles and moral values, so that they will become exemplary adults and good parents themselves, thereby upholding their parents' family-related values. (p. 228)

Although the current study investigated family routines and not family leisure, the participants in this study also emphasised these values. To compare the two studies, Shaw and Dawson's (2001) participants also stressed that the significance of these family interactions were because of the ability to improve family connection, interaction and bonding on the one hand, and child development on the other hand. In terms of family bonding goals, Shaw and Dawson's (2001) study showed that parents were particularly concerned with keeping the family together and making sure that the family unit stays intact. Family leisure was used as "insurance to guard against the possibility of drifting apart", and also allowed them the opportunity to foster a sense of family togetherness and identity (Shaw & Dawson, 2001, p. 223). This overarching theme reflects the parents' assimilation of various societal ideologies and discourses of the family and family time. *Family time*, as an ideology, is a product of a very specific socio-historical context; a context of contemporary, industrialisation and traditional family ideals. It holds that the family is "the major space in society in which the individual self [can] be valued for itself" (Zaretsky, quoted in Daly, 2001, p. 284). Within this ideology, family time is seen as respite from work life and needed in order to cope with the various pressures of modernity (Daly, 2001). Quality time together

is believed to enhance the collective well-being of the family unit and is seen as a central ideal in life that must be strived for in order to experience some sense of significance (Daly, 2001). Shaw and Dawson (2001) believe that their findings reflect their participants' assimilation of traditional North American ideologies of parenthood. Thus, the mention of these same cultural ideals by South African parents indicates the resemblance between some of our cultural ideals and those of North American populations. In terms of developmental goals, what was also clear in Shaw and Dawson's (2001) study of family leisure was that parents aim to instil morals and family values, pass on expectations of appropriate behaviour, and cultivate ideals about life in general (Shaw & Dawson, 2001). Similarly, the participants in this study emphasised that family routines were spaces in which they can teach children appropriate behaviour and various skills and values so that they can become competent adults. The fact that the parents mentioned the developmental benefits of routines was not surprising, as this has been well documented by Weisner and colleagues (Gallimore et al., 1993; Weisner, 2002a, 2002b; Weisner et al., 2004) – it forms the central premise of their Ecocultural Model. As discussed in Chapter 2, this model recognises routines as activity settings or zones of proximal development in which parents can guide children through apprenticeship and thus teach them how to thrive in their surrounding cultural and ecological context (Gallimore et al., 1993). There was no specific theme in the current study in terms of which skills or which values parents preferred to pass on to their children. However, what was evident was that family routines allowed for a whole range of learning opportunities, and that different families emphasised different values. Yet one thing that this study points out that was not apparent in the Ecocultural Model is the benefit of the intrinsic temporal nature of family routines, and that adhering to routines creates a sense of regularity, structure and timeliness in children, which is of itself a desirable value.

A problem with the discussion above is the comparison of family routines with purposive leisure, which many might say are two very distinct types of family interaction. This leads us to the discussion of *family time* as analysed by Tubbs et al. (2005). According to Shaw and Dawson (2001), family purposive leisure must be distinguished from other obligatory family activities, such as household chores, and is thus not seen by them as similar to family routines. Similarly, Daly (2001) described family time as special time, bracketed off and set aside from work activities or domestic duties, with the explicit purpose of creating unique family interaction. This type of interaction has been believed in the past to be purchased free time during which parents spend money on activities such as going to the zoo or theme parks (Tubbs et al., 2005). However, Tubbs et al. (2005) showed that this is not always the case, especially in low-income households. The study by Tubbs et al. (2005) showed that low-income families also find time for intensive parent-child bonding during the day, but that these interactions usually take place during common daily activities. Low-income mothers, who were the primary focus of the study, ensured family time by introducing it into daily routines, thus compensating for their lack of temporal and financial resources (Tubbs et al., 2005). This strategy has also been found in other research (De Vault; Frankel; Jones; Kubey; all cited in Tubbs et al., 2005). Although the first-time parents in this study did mention going on enjoyable family outings such as going for drives, going to parks, taking walks or going to the mall, a substantial amount of their family time and quality time interactions happened on a daily basis during routine bathing, cooking, cleaning, eating, grooming and bedtime activities. As mentioned in Chapter 3, the Bureau of Market Research at the University of South Africa uses seven categories to distinguish between the household yearly income of South Africans (Masemola et al., 2010). Eight out of the 10 families in this study fell somewhere between the second (R50 000 to R100 000) and third lowest (R100 000 to R300 000) household income categories, and one family fell in the lowest category (R0 to

R50 000). It is possible that incorporating purposive leisure and family time into daily routines is a strategy used by these low- to middle-income earners to minimise the temporal incongruence they already experience. On the other hand, it is also possible that the attainment of these secondary goals is a natural by-product of family routines (irrespective of constraints of time and money), as they allow the space for interaction to occur.

### 5.1.3 Challenges First-time Parents Face in Sustaining their Daily Routines

The third research question asked: *What challenges do first time parents face in sustaining their daily routines?* Various **intra-** and **extra-familial barriers** were found to impede the management of satisfying daily routines. The finding that the family is affected by factors from inside the family system, as well as factors from the surrounding supra system, is consistent with various family system theories, such as Cowan and Cowan's (2003) six-domain model of family functioning during the transition to parenthood, McGoldrick and Carter's (2003) family life cycle perspective, general resilience theory (Walsh, 2003), McCubbin and McCubbin's (1996) Resiliency Model, and Weisner's (Gallimore, et al. 1993) Ecocultural Model. Thus, just as intra- and extra-familial barriers and protective resources can have an impact on overall family well-being and resilience, so too can these factors have an impact on a specific family phenomenon such as family routines.

One underlying resemblance that connects all of the barriers identified in this study is that they each **increase the temporal and/or task complexity of the family's sequence of routines**. Thus, the association between the themes of this research question and the themes related to research question one (*What do daily routines look like in the lives of first-time parents?*) is of significance because each of the factors highlighted here is inextricably linked to the themes of *sequence of unfolding routines* and the *temporal structure* (see Section 5.1.1.1). These barriers either make it harder to accomplish tasks on time and thus make it

harder to stick to the family's temporal plan, make it harder to design a satisfying schedule, or create disruptions in the schedule so that it is hard to effectively and consistently implement it. Secondly, it is also possible that one of the ways in which these intra- and extra-familial barriers are related to themes from the first research question is that, because they increase task and temporal complexity, a build-up of these barriers could eventually increase temporal incongruence, thus creating a greater divide between the family's ideal sequence of routines and the time available to implement it. The increase in complexity could also increase the likelihood that the sequence is derailed or "thrown out" on some days, making the schedule less functional and not allowing the family to reach all of their instrumental, developmental and bonding goals.

Each of these intra- and extra-familial barriers will be touched on, starting with the three extra-familial factors, namely transport limitations, workplace schedules, and extended family involvement, and continuing with the intra-familial obstacles, which are child difficulties, incongruence between family members' needs, and health complications. Lastly, this section will discuss the final theme related to this research question, which is the presence of a composite of intra- and extra-familial barriers.

#### 5.1.3.1 Extra-familial barriers

##### 5.1.3.1.1 Transport limitations

In terms of transport, the families usually had one or no car, causing them to make various adjustments so that they could get from point A to point B before and after work. These adjustments meant that couples had to travel together or use public transport, such as busses, trains and taxis. Travelling together led to an increase in time spent on the road to drive to two or three different locations. Furthermore, making use of an inadequate public transport system can be a struggle, as it may be distant and difficult to get to, may make the journey

longer as the parent is forced to follow various public transport routes, and can be challenging with an infant and all the required baby supplies, such as prams and travelling bags. Living further away from work also meant that, when the couple travels, they often sit in traffic for hours, or have to leave home very early to miss traffic. All of these situations rob families of valuable extra time they could have spent on satisfying family routines. The term *transport-disadvantaged* has been used to describe people who are low-income earners, have limited access to adequate public transport services, poor access to private motor vehicles, and are compelled to spend more time and money on travelling (Duvarci, Yigitcanlar, Alver & Mizokami, 2011).

Research shows that travel time can have a major impact on an individual's psychological, social, familial and physical health. For example, in the United States an increase in commute time has been associated with a decrease in socially-orientated trips, such as trips taken to attend recreational activities, visit relatives, attend weddings and funerals, or attend to family and personal obligations (Besser, Marcus & Frumkin, 2008). In contrast, less travelling time may have positive implications for family involvement in routines, as mothers who telecommute reallocate the travelling time they save to caregiving practices and domestic tasks (Hilbrecht, Shaw, Johnson & Andrey, 2008). In their review, Strazdins et al. (2011) point out how time, income and location are all variables involved in health inequalities. The argument is that time is profoundly related to health, as more time means more opportunity for social, personal, medical, familial, emotional and physical endeavours that increase the overall well-being of the individual (and the family) (Strazdins et al., 2011). However, time and location are inextricably linked. Time scarcity is subject to where people live, as it affects the amount of time people spend on the road (Massey, cited in Strazdins et al., 2011). The review also points out how the geographic layout of homes reveals economic cleavages among social groups and in effect keeps these cleavages intact (Dodson & Sipe; Randolph &



Holloway; Tranter; all cited in Strazdins et al., 2011). Homes located close to the city centre are generally more expensive, and thus only the rich can afford to live there (Strazdins et al., 2011). What may further establish the health and wealth of people living in these prime areas is that they may find a better work-life balance because they can reallocate the extra time they would have spent on travelling to more profitable work-related activities and family leisure activities. Families who save money on living costs by residing further away may have less time for economic enterprises and building family well-being. Thus, the location of a family's home (and the travelling obstacles it avoids) can be a fundamental economic and health resource (Strazdins et al., 2011). Looking at this factor in the light of South Africa's apartheid past, the location (and relocation) of disadvantaged social groups has played, and is still playing, a major role in the economic and social well-being of these families because, among other things, it affects their travelling arrangements and amount of non-travel time available.

#### 5.1.3.1.2 Work schedules

A prominent theme from the data was that work increases the task and temporal complexity of a family's sequence of routines, firstly by decreasing the amount of family time available and, secondly, by making it hard to find a level of consistency in schedules because of unpredictable work-related characteristics.

Research concerning the work-family interface has gained momentum in recent years, especially the bidirectional impact these two life-domains can have on each other (Fraenkel, 2003). Based on previous research, it was speculated in Chapter 2 that shorter parental leave (Oomens et al., 2007; Pavalko & Henderson, 2006), inflexible work hours (Dancaster, cited in Mokomane, 2009), parents' desynchronised work schedules (White & Keith, cited in Fraenkel, 2003), and family-unfriendly labour legislation (Dancaster, cited in Mokomane,

2009; Oomens et al., 2007; Pavalko & Henderson, 2006; Sorj, 2004) could play a role during this life cycle stage. However, what the families in this study spoke about was not so much that they had little parental leave or inflexible work hours, but that work obligations take a large chunk of time from the family's daily schedule and increases the likelihood of temporal incongruence (discussed in 5.1.1.3). The first-time parents consistently spoke of a lack of time and that more time would be a great help to them. As work life increasingly infiltrates into family domains, parents find it difficult to make time for each other and their children (Baldock & Hadlow, 2004; Daly, 2002). Because of financial and social pressures in our modern-day society, work-related responsibilities increasingly absorb large portions of parents' schedules (Daly; Garey; both cited in Tubbs et al., 2005) and parents are forced to downgrade family time so that it takes up smaller and smaller slices of the daily agenda (Tubbs et al., 2005). For lower wage earners, this might be especially so (Dunifon, Kalil & Bajracharya, 2005), making it harder for these families to manage their family routines (Sheely, 2010). Baldock and Hadlow's (2004) SOCCARE study, which included 246 interviews with families across five European countries (Finland, France, Italy, Portugal and the UK) deliver compelling evidence that the fundamental concern for families in their daily lives is not so much a lack of family-friendly policies, inadequate care services or the inflexibility of work schedules, but rather lack of family time. Baldock and Hadlow (2004) state:

Much of the work-life balance literature, insofar as it considers the micro issues of care management at all, treats the scheduling problem as essentially one of flexibility. The key solutions recommended are more family-friendly and flexible work timetables, and care services available at more varied times. The implication is that if there is enough flexibility on the part of employers and service providers, coupled with appropriate government policies allowing, or requiring parental and care leave, then parents will be

helped to combine their employment and care responsibilities. However, this is not how the parents themselves spoke of the issues. Rather than suggesting ways in which their time could be better arranged, they simply pointed out that they did not have enough of it. (p. 713)

Thus, when it comes to scheduling processes, making use of more flexible family-friendly policies would not necessarily produce a better work-life balance. Helping families find solutions to increase their family time (such as embedding family time in mundane daily tasks), might. Furthermore, what families in this study talked about were erratic and unpredictable work schedules, which complicated their ability to find a level of consistency and regularity in their routines. Too much change in work schedules makes it harder for first-time parents to plan their family time. The fathers and mothers spoke about erratic schedules due to shift work, unpredictable bosses, unpredictable work-related deadlines, and fluctuations in going-home time. Thus, it might not only be that families need more flexibility in work schedules, but that they require more consistency and predictability.

#### 5.1.3.1.3 Involvement of the extended family

Looking at Cowan and Cowan's (2003) model of the six domains of family life that experience changes during the transition to parenthood (discussed in Chapter 2), the renegotiation of roles and relationships between the new parents and the older generation forms a crucial part of this life cycle transition. As mentioned, grandparents' involvement usually increases during this phase, but is not always experienced positively (Cowan & Cowan, 2003). As grandparents have moved up a generation they need to take on a new, supportive role, rather than being the primary caregivers (Goldenberg & Goldenberg, 2008). Establishing appropriate boundaries between the new nuclear family system and the families of origin is a central task that the couple must master (McGoldrick & Carter, 2003), but it

may be a far greater task to manage if the young couple is still residing in the same house as their parents. The families in this sample deviated considerably from McGoldrick and Carter's (2003) family life cycle predictions, with seven out of 10 young couples skipping the stage of leaving the home of their family of origin before having children. This deviation was one of the major critiques against the family life cycle perspective, highlighted in Chapter 2, and is consistent with the findings of Statistics South Africa (2005) that 38.2% of infants (aged 0 to 4 years) are living in multigenerational households with a grandparent as the head of house, rather than the parent. What this research study highlighted, however, was the effect this multigenerational household can have on the stability, regularity and implementation of a satisfying family Routine. Apart from the many couples who mentioned positive implications, two couples in this study spoke about the negative impact their parents were having on their nuclear family routines. In these cases, the grandparents' involvement made it harder for the family to gain consistency by undermining the couple's childrearing decisions, undermining the couple's chosen family routines, or expecting favours at times when the couple had already made plans to spend time together. Another complication was when the young child was allowed to move between the nuclear family's schedules and the grandparents' schedules (especially when these schedules were not synchronised), causing disruption in the child's sequence of routines and making it difficult for the young couple to find a satisfying rhythm. For clinicians supporting first-time parents in a South African context, it would be important to take the dynamics of these living arrangements into consideration. In terms of research, what would be interesting to explore is how couples manage to establish satisfying boundaries in these situations. There seems to be very little research on these multigenerational South African households and the implications it might have on family resilience.

### 5.1.3.2. Intra-familial factors

#### 5.1.3.2.1 Child related difficulties

Besides the fact that the presence of a child increases the number of activities that need to be squeezed into the family's schedule (Bischoff, 2004), four couples in this study mentioned that their morning and evening routines would go a lot smoother if they could just get their child/children to be more complacent and cooperative. One father talked about the stubbornness of his son when trying to get him into the bath, two mothers spoke about how difficult it was to get their sons organised and ready in the morning, and some parents even tried to dress their children while they were still asleep because when the child was awake it caused disruption to the completion of tasks, "throwing out" the sequence of routines. As routines are associated with consistent and predictable time schedules, children's erratic or uncooperative behaviour can slow down tasks and make it harder for the family to adhere to their temporal structure. Very few studies have analysed the impact that problematic child behaviour and temperament can have on family routines. These studies are usually related to severe cases where young children suffer from developmental delays or major behavioural problems. These studies reveal the difficulty parents have in managing their family routines, and they may even feel that their family routines are dictated by the child. In these situations, families have to modify their routines to accommodate the child's needs, avoid problematic situations, or avoid conditions in which the child may display embarrassing behaviour (Maul & Singer, 2009; Woods & Goldstein, 2003). For instance, autism (Norton & Drew, 1994), ADHD (Mash & Wolfe, 2005) anxiety disorders (Mash & Wolfe, 2005) and severe mental retardation (Maul & Singer, 2009), have all been noted to cause disruptions in routines. If one takes ADHD as an example, infancy is earmarked by unpredictability and erratic sleeping and feeding patterns, and at preschool age children tend to react negatively and strongly to routine events (Barkley, DuPaul & McMurray; Campbell; all cited in Mash & Wolfe, 2005). When it

comes to anxiety disorders, a child may cling to the parent and want to know where the parent is at all times, which makes it difficult for the parent to be independent and accomplish tasks (Mash & Wolfe, 2005). However, it is likely that any child with a difficult temperament could slow down the process of finishing daily tasks or engaging in meaningful family interactions (even without a diagnosis of a severe cognitive, behavioural or emotional disorder). Even in families who are relatively normal and functioning adequately, child behaviours can increase temporal incongruence and create disruption in schedules. As one mother in this study mentioned, their bathing routine is a time for her and her daughter to connect, unless her daughter is being difficult, which makes the routine unpleasant. In such cases, the mother does not feel able to communicate affection or achieve her goals through the routine. Thus, helping first-time parents with basic parenting skills that will improve the child's cooperation could help parents to manage a more satisfying family routine.

Furthermore, some couples mentioned the constraint of having to constantly supervise children (a by-product of their age), which hampers a parent's ability to do other domestic tasks. This reduces the time the parents have available to accomplish needed family goals, making them rush through certain activities. Lastly, this study finds support for Goldenberg and Goldenberg's (2008) mention of a disruption in family routines due to children's complicated sleep-wake cycles, as some parents mentioned how their newborn's irregular sleeping patterns threw out their temporal rhythm, affecting the temporal structure of their routines.

#### 5.1.3.2.2 Incongruence between family members' needs

When family members have similar interests and needs, they may find it easy to choose what activities and routines must be engaged in. For instance, if everyone enjoys watching a particular show in the evening during dinnertime there is no need for a debate about whose

desires take precedence, since everyone wants the same leisure routine. However, when family members disagree, it can become complicated to find time so that every individual's needs are met. This incongruence was mentioned by the parents as one factor complicating the management of their set of routines. The incongruence was either between the spouses, or between the needs of the parent and the child. When it came to the spouses, husband and wife tended to disagree over leisure activities, with most women wanting to watch soap operas or go to shopping malls for relaxation, and many men wanting to watch sport to unwind. Differences between parent and child were usually due to discrepancies in age, with the parent having to compromise their leisure time for the sake of the child's interests. This theme is consistent with the Ecocultural Model (Weisner et al., 2004). Weisner et al. (2004) emphasise that the management and implementation of a satisfying set of routines hinges upon the family's ability to negotiate a schedule that allows for the interests of each member. However, when family members constantly disagree it could increase the likelihood of temporal incongruence, as there will simply not be enough time available to implement the family's ideal sequence of routines.

#### 5.1.3.2.3 Health complications

Health was another factor that complicates the family's ability to accomplish tasks and manage a satisfying temporal structure. When looking at illness and disability through the lens of a normative systemic health paradigm, one has to recognise that the illness, the ill family member, and the family system as a whole, all have a bi-directional impact on one another (Rolland, 2003). Not all illnesses will have the same impact on the family's well-being. The impact is mediated by certain illness variables: the onset of the illness (meaning acute or gradual), its course (whether it is progressive, constant or episodic), the outcome (whether it results in death or not), the type and level of incapacitation (impairment in cognition, sensation, movement, stamina or disfigurement, and social stigma), the phase of

the illness (the initial crisis phase, more stable chronic phase, or final terminal phase) and, most importantly for the study of the transition to parenthood, its concurrence with various life cycle stages (Rolland, 2003). In this study, there was no similarity in the type of illness family members were dealing with, or which family member was affected (except that none of the fathers in the study suffered from an illness). Illnesses included mothers' hypertension or chronic back pain (which was complicated by the pregnancy), infant breathing difficulties, birth complications, and a high frequency of child flu and tonsillitis. Whether it was the mother or the child, the couples recognised the impact ill health had on their family routines. The physical disability in parents either meant that they were hospitalised on occasion and were physically absent from the home (especially in the months following the birth), or it hindered their ability to accomplish daily tasks when they were at home. For example, some mothers spoke about the inability to be involved in child bathing routines or playing routines because of physical impairment. In these cases the caregiver parent (the father) had to take over most of the family tasks. When the ill family member was the child it also caused problems for family routines, as the caregiver parent, which was usually the mother, would be occupied by (or at times even engrossed in) her caregiving responsibilities, thus hindering her ability to share in other family routines and accomplish needed family goals. Thus, illness causes an increase in temporal and task complexity because it slows down the completion of duties, decreases the availability of human resources to manage the schedule, increases the amount of family needs, and causes unpleasant disruptions in schedules and tasks with trips to the doctor or unexpected care duties.

#### 5.1.3.3 A composite of factors

None of the families in this study had to deal with only one of the intra- and extra-familial barriers mentioned above. Most families had to deal with multiple, concurrent complications that increased task and temporal complexity. For example, one couple struggled with their



child's erratic health complications, transport limitations by not having a working car, the new task demands necessitated by their child, and problematic involvement by the extended family. Another family dealt with the father's shift work schedules, the mother and child's health complications, and the new infant's task demands. Another couple had to manage very taxing work schedules, drove with one car, lived far from work, managed a temperamental child, and experienced incongruence when it came to their leisure activities. Walsh (2003) has emphasised that the ability of the family to adapt to stressful life events is contingent on various factors. One of these factors is the build-up of complications and the extent of the concurrent obstacles the family has to manage (Walsh, 2003). Similarly, McCubbin and McCubbin's (1996) Resiliency Model recognises that the impact of a stressful life event on a family system is mediated by the family's appraisal of the stressor, but also by the build-up of coexisting stressors. Just as this is true for general family system adjustment and adaptation, this study shows it must be taken into consideration when examining specific systemic mechanisms, such as family routines. Clinicians and researchers examining the family's set of routines need to take into consideration the potential for concurrent complications. The presence of one of these barriers may not seem extreme, but an overload of minor barriers may tip the system's equilibrium, causing a state of chaos, distress and time starvation.

#### 5.1.4 Factors Assisting First-time Parents in Maintaining their Daily Routines

The fourth research question asked: *What factors assist first-time parents in maintaining their family routines?* Similar to the previous section on barriers, the themes in this section on resources correspond with all the family system theories discussed in Chapter 2 (Cowan & Cowan, 2003; Gallimore, et al., 1993; McCubbin & McCubbin, 1996; McGoldrick & Carter, 2003; Walsh, 2003) in that they recognise the influence of factors from within the nuclear family system (**intra-familial factors**), as well as the impact of factors from the wider, surrounding systemic network (**extra-familial factors**). Thus, besides the fact that intra- and

extra-familial factors help the family system as a whole, these resources also positively influence specific system components, such as the phenomenon of family routines.

Also corresponding with the previous section on barriers, these resources seem to influence the task and temporal complexity of family routines. However, rather than increasing the complexity, all of these intra- and extra-familial resources decrease the complexity. This **decrease in task and temporal complexity** was the overarching theme selected from the data. In other words, the basic answer to this research question (*What helps first-time parents manage their daily routines?*) is any intra- or extra-familial factor that either decreases task complexity, decreases the complexity of the temporal structure, or both. The reason I say both is that task complexity and temporal complexity seem to be inextricably linked. Logically it makes sense that if there is a decrease in task complexity, and the tasks within a routine can be accomplished efficiently, then it would, in effect, help the temporal structure, because routines will be completed on time. For example, if a parent possesses certain skills that allow him or her to accomplish tasks effectively, such as being able to dress and control children easily, it will be easier for the family to adhere to their time schedules. Likewise, an uncomplicated temporal structure seems to affect how easy it is to accomplish the tasks within a routine. Thus, if the family is very skilled at planning and have a well-oiled time schedule that they adhere to, tasks seem to be done easily. This link can be seen throughout the discussion of each of the intra- and extra-familial barriers.

The most salient extra-familial resource at the nuclear family's disposal was support from the wider family network. Intra-familial resources were couple cooperation and tag-teaming sequences, planning and pre-empting the future, sticking to the sequence and temporal structure of routines, competencies and helpful characteristics of individuals within the family system, and parents' sense of commitment and responsibility towards family

members. Each of these resources will now be discussed in the light of corresponding research studies.

#### 5.1.4.1 Extra-familial resources

##### 5.1.4.1.1 Support from the wider family network

Looking at resilience resources after the transition to parenthood, Walters (2009) also identified social support as a key adaptation resource for first-time parents in South Africa. In the qualitative component of her study, 62% of the respondents (N = 89) mentioned the assistance of family and friends as a key factor in managing this stressful life transition (Walters, 2009). Furthermore, based on their extensive reviews of family resilience processes, McCubbin and McCubbin (1996), Walsh (2003), Black and Lobo (2009), as well as Bhana and Bachoo (2011), mention social support as an important resource that fosters healthy adaptation when a family is faced with a serious life stressor (whether normative or unexpected). In general, social support is an important resource for various reasons. One reason is because friends and extended family can offer struggling parents practical assistance. Also, these key relationships may come in handy when emotionally strained family members need to vent and communicate with a trusted confidant. Social support could also add needed material and monetary assistance when these resources become depleted by the stressor. However, this study highlights a very specific pathway in which extended family support can buffer against the negative impact of a stressor and protect the new family unit against systemic upheaval. This pathway is through the management of family routines. All the couples in this study relied heavily on the support of their parents and siblings to decrease the complexity of their tasks and schedules, whether they stayed with their family of origin or not. However, it did seem that living in the home of the family of origin had special benefits, as these grandparents were substantially involved in assisting with routines. This was

particularly so when the grandparents knew the schedule of the young couple and child well, and reinforced this schedule. Examples of supportive grandparents were often related to them stepping in when something unexpected happened to derail the regular sequence of routines. Examples of these crisis situations were when parents overslept, had a crisis at work, or suddenly fell ill. Grandparents also stepped in when parents needed some respite and quality time together. Furthermore, the young couple's parents and adult siblings did not only help on occasion or in a crisis situation, but also had a more substantial presence during day-to-day tasks and routinely took over by cooking dinner, cleaning the house, washing clothes, or fetching children from day care. All of these factors mean that parents have more time (decreasing temporal incongruence) and can implement their sequence of routines with greater temporal regularity. It must be noted that these couples often also assisted their parents and siblings, pointing to a reciprocal and mutually beneficial relationship. For instance, having a lift club with a sibling meant that one parent took children to day care and the other brought them home. Another example of this reciprocal relationship would be when grandparents looked after grandchildren while the parent cooked dinner for everyone.

To my knowledge, only one research study has focussed solely on what factors assist parents in implementing their family routines. Using a qualitative design, Medved (2004) studied the practical actions parents take to manage their routines. One of these actions was termed *reciprocating* (Medved, 2004). This refers to behaviours engaged in by parents that exchange childcare services with family members on a routine basis (Medved, 2004). Thus, Medved's research supports the findings of this study in that both point to the regular and habitual reliance on extended family to implement and maintain a satisfying set of family routines.

#### 5.1.4.2 Intra-familial resources

##### 5.1.4.2.1 Couple cooperation and tag-teaming

Many researchers have pointed to the quality of the marital relationship as a key resource when it comes to coping during the transition to parenthood (Cowan & Cowan, 2003; Knauth, 2001; Walters, 2009). In her study of South African first-time parents, Walters (2009) found that 34% of her participants (N = 89) mentioned a good relationship with their partner as a factor that helped them adapt to this life cycle transition. The current investigation elaborates on Walter's (2009) research by revealing a very specific feature of the marital relationship that assists first-time parents. What came to the fore was that cooperation between the spouses and a daily tag-teaming sequence employed by the couple helped them manage their family routines. By helping each other, the couple could accomplish tasks efficiently, which reduced the complexity of their routines. The tag-teaming sequence meant that, while one parent engaged in personal or domestic activities, the other took the opportunity to spend quality time with the child, and then the parents switched. By taking turns and working together, the parents ensured that all the needs of the family members were being met, because when one parent focused energy on the child, the other could use the moment for respite, social interaction or managing the house. As mentioned before, the Ecocultural Model emphasises that it is important that a family's set of routines addresses the needs and desires of all family members and that there is no incongruence (Weisner et al., 2004). This multi-tasking sequence helps them accomplish their multiple duties within set time limits. This could then, in turn, decrease temporal incongruence and increase the likelihood that parents will have enough time to engage in all their desired family routines. Medved (2004) found similar results and termed this tag-teaming sequence *alternating*, which refers to the spousal action of routinely swapping childcare duties and thus trading opportunities to spend time with the child. Maul and Singer (2009), who studied

family routines in families with a mentally delayed child, also found that tag-teaming helped parents cope with their daily challenges. It is likely that the ability of the couple to cooperate with each other and employ a well-oiled tag-teaming sequence is affected by the quality of the marital relationship and the ability of the partners to negotiate a sequence of routines that both feel is fair and appropriate. Because this study did not use any quantitative measures to establish couple communication or the quality of the marital relationship, this link could not be made and is a potential avenue that could be explored in future research.

#### 5.1.4.2.2 Planning and pre-empting the future

A few parents in the study mentioned that planning ahead and pre-empting any future challenges or events helped them manage their routines. Thus, the parents spoke of accomplishing tasks in advance so that future routines could go smoothly, such as packing bags and lunches the night before, defrosting and cooking meat the day before, cooking puree for the child at the beginning of each week, or setting out clothes in the evening before going to bed. When analysing effective actions families take to manage their family routines, Medved (2004) found similar results and termed these adaptive actions *prepping*. Furthermore, the parents in this study made regular contact throughout the day to plan for evening and weekend events. Likewise, Medved (2004) identified this kind of routine of “checking in” throughout the day (termed *connecting*) as a key strategy that helps parents manage their family routines. What also came to the fore in this study were parents who planned a well-structured time schedule that allowed for expected and unexpected error. Examples of unexpected complications were: a sudden delay in morning traffic, forgetting an important item at home and having to turn back to fetch it, or having a child who suddenly falls ill. Parents also mentioned the expected complication of difficult child behaviour. In such cases, having a temporal structure that allows for a margin of error by working in an extra, “free” 15 to 30 minutes here and there ensures that they still get to their destinations on

time. By making such allowances, the entire sequence of routines cannot be derailed by these complications.

#### 5.1.4.2.3 Sticking to the sequence and temporal structure of routines

Walters (2009) found that being consistent and disciplined when implementing family activities bolstered first-time South African parents' ability to adapt after the transition to parenthood, as 23% of participants ( $N = 89$ ) mentioned this factor in the qualitative component of her study. According to Grochowski and Karraker (2006) and Howe (2002), routinely implementing activities provides predictability, stability and safety, which decrease family and individual stress. The current investigation adds to the literature by highlighting another beneficial consequence of consistency. What it shows is that time consistency and discipline in implementation is an intra-familial factor that decreases the task and temporal complexity of the family's set of routines. The reason for this decrease in complexity is that, by habitually implementing their routines and their set timetable, the parents ensure that the child gets used to the family's temporal structure. Thus, the child becomes programmed with an internal clock. Similar to predictions made by Fiese et al. (2002), parents in this study emphasised that this internal clock made children easier to handle and more complacent. However, it is also beneficial for the parents, as they fall into a set daily rhythm and can function on autopilot. The parents mentioned that knowing what activities come next, who has to do them, and how they must be accomplished means that they can fall in line without having to negotiate with each other. All of these benefits help the family to stick to their schedules. Thus, the circular logic seems to be that being more consistent when implementing family routines, in effect, helps the family to be more consistent in implementing family routines. This finding also corresponds with the Ecocultural Model (Weisner et al., 2004), as it emphasises the importance of a consistent and stable daily rhythm. Without this consistency and stability, the family's set of routines becomes unsustainable (Weisner et al.,

2004). So, although change is inevitable and families need to be flexible, too much change within the system can have adverse consequences for the long-term implementation of a satisfying daily Routine, which eventually affects the adaptation and development of the family (Weisner et al., 2004).

#### 5.1.4.2.4 Competencies and characteristics of individuals

In the discussion of the Resiliency model in Chapter 2, it was mentioned that helpful competencies of individual family members are one protective resource that helps the family thwart the impact of a stressor (McCubbin & McCubbin, 1996). When utilised, these individual abilities and character traits (such as a positive attitude, problem-solving skills, or helpful communication styles) increase the likelihood that the unit will recover and positively adjust and adapt after systemic upheaval (McCubbin & McCubbin, 1996). Complementary to the Resiliency Model, the present study also identified individual competencies and characteristics as a resource. These competencies and characteristics are specifically helpful in decreasing the task and temporal complexity of routines, and thus they make it easier for parents to manage routines. For instance, two mothers mentioned the agreeable nature of their children as having a positive impact on their routines. This is consistent with findings from Walters (2009), as 9% of the first-time parents ( $N = 89$ ) in her study indicated that having an agreeable child makes the transition to parenthood easier. The positive impact of an agreeable child on the system has also been mentioned by Fiese et al. (2002), Cowan and Cowan (2003), and Towers et al. (2003), as discussed in Chapter 2. Furthermore, some parents in this study were identified as being particularly skilled at daily tasks, such as managing children or cooking and cleaning. For instance, one father kept saying that he did not know how his wife handled their children because they were a handful and he struggled to manage when she was not around. Another father stressed that he could handle anything because he worked for the military and had ample experience in cooking and childcare when he was young. Thus, parent



training programmes that focus on increasing parents' child care and domestic task competencies may increase the ease with which parents implement and manage family routines, and thus they could help to smooth over this transition period. However, parents in the current investigation also pointed out that certain individuals (whether it is the child or a parent) like structure and predictability and thus adhere to these routines easily and faithfully. The conscientiousness of these individuals has an effect on the entire family, as their punctuality and consistency reminds the rest of the family to stick to their sequence and temporal design. In future, it would be interesting to verify this finding with quantitative investigations to see whether there is a distinct correlation between the maintenance of family routines and certain personality traits, such as conscientiousness. To summarise, the individual competencies that especially help families manage their family routines seem to be child temperament (having an agreeable, easy nature), child and adult personality (liking structure and organisation), as well as parents' helpful domestic and caretaking skills (being able to control children, or cook food easily and efficiently).

#### 5.1.4.2.5. Parents' sense of commitment and responsibility towards family members

As discussed in Chapter 2, the transition to parenthood inevitably necessitates various compromises and sacrifices from parents because of the practical demands of the new baby (Cowan & Cowan, 2003; Goldenberg & Goldenberg, 2008). As a day has only 24 hours, the couple's schedule cannot remain as before, because something has to give way to make room for all the extra child-related routines (Goldenberg & Goldenberg, 2008). During the analysis it became evident that the parents often spoke about these sacrifices and compromises, but this was always followed up by the parents' insistence that these sacrifices were part of their responsibility as parents, or that it was made easy by their commitment and love for the family. Thus, being committed to one's role as parent, being committed to keeping the family unified, and wanting to see the family reach its developmental and relational goals makes it

easier for parents to focus their energy on childrearing rather than on personal endeavours. Because of their focus on the greater good, parents are more willing to accept the incongruence they experience between their needs and the needs of other family members. In this way, these personal sacrifices decrease the difficulty of figuring out whose needs will take precedence and thus decrease the complexity of the sequence of routines. Other research has also pointed out the importance of commitment as a resilience resource when faced with a stressor (McCubbin & McCubbin, 1996), such as the transition to parenthood (Silliman, 1995; Walters, 2009). Walters (2009) found that 45% of first-time parents ( $N = 89$ ) emphasised the importance of commitment, meaning that family members find it helpful to employ altruism and devotion in order to work together so that they reach communal goals. Furthermore, what people believe it means to be a parent (the parental role) is based on cultural ideologies within a society. In the present study, the parents' sense of responsibility for attaining happy family togetherness and ensuring the development of the family unit also seemed to invoke certain social ideologies concerning parenthood. Thus, their level of commitment may very well depend on how well they have adopted certain cultural values and assimilated these ideals into their own personal identity. Walters (2009) also found that 36% of first-time parents ( $N = 89$ ) made statements that revealed their ability to tap into these parental ideologies and associate themselves with a culturally constructed parental role. The assimilation of the parental role as developmental task and adaptive resource during the transition to parenthood has also been mentioned by Cowan and Cowan (2003), McGoldrick and Carter (2003), and Cast (2004). However, what the current study illustrates is a specific pathway through which this intra-familial resource can help families, namely through its positive influence on the maintenance of family routines.

### 5.1.5 Accommodations First-time Parents Make to their Routines in Order to Adapt to the Arrival of their Child

The fifth research question asked: *What accommodations do first-time parents make to their routines in order to adapt to the arrival of their child?* This research question is based on the Ecocultural Model (Gallimore et al., 1993) because it emphasises how important it is for families to make proactive and reactive accommodations to their routines so that they can successfully reach all of their developmental and relational goals (Weisner et al., 2004). Thus, this research question centred on identifying clear adaptive changes made to family routines from pre- to post-birth. It was not as straightforward to choose which themes related best to this research question, as there were links with some of the themes in Section 5.1.4. For example, incorporating extended family into the family's routines on a regular basis could be one adaptive accommodation parents make to cope with the addition of the child. However, when looking at the parents' descriptions, it was unclear whether parents also relied on extended family prior to the transition to parenthood. The only clear themes concerning adaptive change in routines were those of **temporal accommodations** and **various idiosyncratic accommodations** parents make to manage their specific situation. These two themes are discussed briefly below.

#### 5.1.5.1 Temporal accommodations

When there is an interruption in current routines caused by job loss, a promotion or the addition of a child, the family goes through a *restructuring process* of its daily routines (Medved, 2004). This restructuring process is never smooth or linear, but “one of on-going action, interaction and sense-making” (Medved (2004, p.142). The present study contributes to the literature by further explaining what this restructuring process entails. It shows that an important part of this restructuring process is not just adding or taking away certain family routines, but also temporal restructuring (changes in time). Whenever parents were asked

what changes they made to their family routines after their first child was born, they spoke about changes to their temporal structure. Couples spoke of getting up earlier to accomplish the added childcare tasks, going home earlier from social events for the sake of childcare routines, adhering more readily to the temporal structure, and sometimes increasing the speed with which they accomplished activities in order to get through routines on time. When investigating families with developmentally delayed children, Maul and Singer (2009) also found temporal adjustments to routines as an adaptive action. This finding is interesting in the light of the discussion in Section 5.3.1.2, where it was mentioned that scheduling is one of the main challenges parents face in modern-day society. But what parents need is not so much more flexibility in their schedules, as this will likely not produce a better balance in life (Baldock & Hadlow, 2004). What is needed are strategies that help parents increase the amount of time they have available for family interaction (Baldock & Hadlow, 2004). The type of time adjustments the families in this study talked about seemed to reflect this desire for more time. By getting up earlier, coming home earlier from events, and increasing the speed with which they did tasks they increased the amount of time they had available for family time and tasks. In conclusion, this theme again highlights the importance of time, the temporal structure, and temporal restructuring when it comes to routines. Again, it is not only important what happens within a specific individual routine, but how the overall temporal structure, within which these routines are located, affects the day-to-day experience of routines and affects the family's ability to adjust to difficult life transitions. Professionals should not overlook this key element when analysing family routines.

#### 5.1.5.2 The idiosyncratic nature of accommodations to routines

The idiosyncratic nature of family accommodations reflects the individuality of families. Parents take divergent adaptive actions to cope with their own particular situations. This is consistent with Fiese et al. (2002), who point out that one of the reasons why the family

routine construct is so difficult to define is that families engage in routines that reflect their unique personal values and lifestyles. Maul and Singer (2009) also found that families' accommodations to routines are idiosyncratic in nature. This individuality also supports propositions based on the Ecocultural Model (Gallimore et al., 1993), as a family's unique set of routines reflects 1) what kinds of broad cultural values they choose to incorporate into their family environment, and 2) what ecological conditions they have to deal with (such as transport systems, work obligations, etc.). Even though Maul and Singer's (2009) study focussed on families with developmentally delayed children, what they assert can also be true for the transition to parenthood. They underscore the importance of looking at each family's situation and assessing what individual actions they take to adapt to a crisis (Maul & Singer, 2009). By developing interventions that work with these unique accommodations, the strategies will be more relevant and congruent with the family's values, as well as more practical and useful for everyday implementation. This makes them more sustainable in the long run (Maul & Singer, 2009).

## 5.2 Conclusion

It has been discussed that having healthy, satisfying family routines is seen as a key resilience resource that helps families to adjust and adapt to various expected and unexpected life stressors (McCubbin & McCubbin, 1996). Particularly, it is a resource that can buffer against the systemic upheaval and stress induced by the transition to parenthood (Fiese et al., 2002; Howe, 2002). A routine is also seen as a key developmental pathway that allows parents to instil in their children the values and skills needed to survive and thrive in their particular cultural and ecological surroundings (Gallimore et al., 1993; Weisner, 2002a, 2002b; Weisner et al., 2004). However, there seems to be a lack of research, inadequate definitions and incomplete theories concerning this psychological construct. This research study set out to

obtain a greater understanding of the family routine construct as it operates in the lives of first-time parents. As Howe (2002) recommended:

Understanding how successful family routines form, stabilise, or reorganise during [...] periods of change can help us identify new risk and protective factors that can be targeted in the next generation of family-focused prevention trials. (p. 438)

What came to the fore are a few basic principles that can help professionals support first-time parents in establishing a set of family routines that are stable and allow them to reach their day-to-day instrumental goals, as well as their long-term developmental and relational goals.

Firstly, when asking what the family routines of first-time parents look like, it became evident that a particular routine is not an isolated event. A routine is one activity that follows, and is followed by, other routines in a sequence. Thus, in a typical day, these routines unfold one after the other. When one routine in the sequence does not go as planned, it has the potential to derail the entire sequence. The individual routine activity is also greatly influenced by the temporal structure into which it fits. Each family going through this normative developmental transition has to develop and design a sequence of routines, with a temporal structure, that fit their own particular lifestyle. This sequence needs to be functional, helping them to achieve all of their instrumental, relational and developmental goals. In general, a key element that stood out throughout this study is the neglect of prior research to recognise and emphasise the overall sequence structure of routines and the central role time plays in the experience and management of satisfying family routines (Fiese et al., 2002; Gallimore et al., 1993; Weisner, 2002a, 2002b.).

Secondly, when it came to assessing why routines are important to first-time parents it was clear that a family usually has multiple goals that they aim to achieve with a routine.

Although each routine has instrumental goals (e.g. a dinner routine is for eating food), it also has long-term goals. These long-term goals are related to the fact that each family routine, by definition, is a patterned family interaction. Thus, it is an opportunity for the family to spend time together. By spending time together, family members can bond and build on their relational connections. Thus, it helps with the maintenance of the unit. By spending time together, parents and children also get the opportunity to gain meaning in life, as one's family is seen as a central life ideal. Another long-term goal has to do with the development of the child, meaning that parents can impart certain family values and morals to their children, as well as teach them skills. Furthermore, the temporal structure of routines allows children to become more conscientious, organised, time orientated and disciplined. These findings were significant because prominent researchers on family routines have failed to highlight some of these long-term developmental and relational goals (Fiese et al., 2002). Even a simple bathing routine, or cooking routine, can be a space for intimate family interactions and emotional growth. I propose that when routines are analysed there should not only be emphasis on the quality of the instrumental actions, but also whether families feel they reach their long-term developmental and bonding goals. It is also important for professionals to understand *why* a particular routine exists in a family, as this may reveal important family values.

Thirdly, the biggest problem that families in this study faced is incongruence between the multiple routines they *want* to engage in and the available time they have each day to perform all the routines. What further exacerbates this temporal incongruence are the various systemic challenges (both from outside the family system and from within the family system) that make their routine tasks more complicated and make it harder to adhere to their temporal structure. First-time parents identified the following extra-familial challenges: inadequate transport, challenging work schedules, and problematic involvement by the extended family. Problems that were identified from within the system were: child-related difficulties, health

complications, and incongruence between the needs of family members. Some of these barriers are harder to address than others because, for instance, transport limitations and problematic work conditions might not have quick-fix solutions, whereas skills in how to negotiate with one's family of origin and to set appropriate boundaries might be easier to achieve. Professionals interested in supporting first-time parents need to assess the extent of the family's barriers and how well the family employs various coping strategies to thwart or manage these barriers.

Fourthly, families thus need to draw on various systemic resources to reduce the complexity of their tasks and the complexity of their temporal structure. Potential resources from outside the system that couples can draw from are the substantial involvement of extended family members, such as the couple's parents, siblings and aunts. Intra-familial resources are couple cooperation and tag-teaming, adhering to the sequence and temporal structure of their routines, planning and pre-empting future difficulties, helpful competencies and characteristics of individual family members, and the parents' sense of responsibility and commitment to the family unit. In order to help families attain a satisfying and stable sequence of routines, professionals need to take into account the family's specific lifestyle and what resources they employ to decrease their task and temporal complexity. For example, the substantial involvement of extended family and the intergenerational living conditions of some first-time South African parents cannot be ignored. Professionals need to ensure that they understand the various system dynamics of each family and that they tailor interventions accordingly so that the family's set of routines is more manageable and sustainable.

Fifthly, in order to adapt to the arrival of the child, first-time parents can also make certain changes (accommodations) to their temporal structure. An effective approach for clinicians could be to help the family adopt certain principles that will assist them in rescheduling



processes, especially if this rescheduling allows the family to have an adequate amount of time for family interaction. However, families are also unique and make creative, idiosyncratic adjustments within routines that fit their own particular lifestyles. Professionals need to see whether the family is already using creative, adaptive strategies, rather than try to force a family to assimilate predetermined intervention strategies. Professionals can also partner with parents to see whether there are any additional creative changes that will fit well with the unique particulars of the family system.

In conclusion, Howe (2002) argues that the family routine is a promising tool that can be used to give insight into how families organise family interactions. To add to this, the family's set of routines is the very space in which families live their lives and experience what it means to be a family. These are the building blocks of day-to-day reality in which parents manage daily tasks, but also connect with each other and their child in meaningful ways. Routines give purpose to existence and direction to family life. If spending time together is the glue that keeps a family together, a family routine is the vessel that holds that glue. This study thus highlighted various important facets of this psychological construct. It looked at various processes involved in this family phenomenon during the adjustment and adaptation phases of the transition to parenthood. By exploring and strengthening the findings of this qualitative grounded theory research study with further research, it would be possible for professionals to create targeted interventions that fortify the family routines of first-time parents, and thus support families going through this normative life transition. The next section gives recommendations for further research.

### 5.3 Limitations of This Study and Recommendations for Future Research

A researcher always has a particular understanding of the phenomenon under investigation, and this understanding affects what aspects of the phenomenon she feels should come under

investigation, what design should be used, what procedures should be followed, and what analytic strategies should be employed (Henning, 2004). Thus, it is important for researchers to clearly outline the limitations of their studies, as the research findings can never be unaffected by the influence of the researcher. The shortcomings that are highlighted here are specifically related to the data collection process, the research design, and the nature of the selected sample. These shortcomings are then used as the points of departure for future research.

The first limitation is that this research study focused on a very specific family form, that of two-parent families. In other words, it reflects the experiences of couples rather than single parents, divorced parents, remarried parents or adoptive parents. Thus, some of the findings are specifically related to these couple relationships. For instance, the tag-teaming sequence employed by spouses in order to decrease the complexity of their schedules would not be possible for single parents. Research on other family forms going through this developmental transition could produce results that reflect conditions and challenges not experienced by this two-parent sub-group (Medved, 2004). It is thus recommended that future researchers investigate the actions and situations of various family types to gain a better understanding of family life during this life transition. Because of the unique nature of family routines, Fiese et al. (2002) also recommend that “when investigating the range of experiences that families have in their daily lives, it is incumbent upon researchers to recruit a diverse sample” (p. 387). A similar argument could be made about biographical information. Saturation of results was reached after 10 families, as the sample was very homogenous. All the couples had similar cultural backgrounds, comparable living conditions, had children in the same two day-care centres, and lived in an area within a 4 km radius. It is advisable to replicate the study with a larger sample that includes first-time parents from various areas, cultures and

divergent living conditions, as this could produce more intra- and extra-familial barriers and resources (Fiese et al., 2002; Kouneski, 2000).

Furthermore, the qualitative design relied on interviews. Thus, the findings are based on the perceptions of first-time parents and the researcher's interpretations of those perceptions. As I (the researcher) am not a parent, the difference in lifestyle between me and the participants could have affected my view of their family situation. This difference could have enhanced my analysis, as I could easily compare their lives with my own, allowing me to recognise challenges and resources only related to their unique situation. However, the lack of personal experience in raising a child could have caused me to miss important experiential details. Thus, it is recommended that future researchers also employ naturalistic observations by a third party (Fiese et al., 2002). Naturalistic observations could corroborate and enhance data generated from interviews, producing a more detailed description of family life. Thus, having another third-party perspective could increase the credibility and reliability of the data collection process (Lincoln & Guba, 1985). Fiese et al. (2002) also recommend the use of diaries, which they feel could be a detailed and fruitful way of establishing how family routines are patterned in family life. Future researchers could use these techniques to further strengthen the trustworthiness of such a qualitative design.

Another limitation of the research design was that there were no observations of family routines prior to the transition to parenthood. Thus, findings related to change were based on what couples could remember from life prior to the birth. As resilience is an on-going process that goes through various phases (Walsh, 2003), it is advisable to do longitudinal research that could capture the finer nuances of such change (Kouneski, 2000).

Lastly, no quantitative measures were used, as this study relied purely on qualitative investigation. It would be interesting to combine this study with instruments that measure levels of family functioning. This is because it is possible that the routines and coping strategies of well-functioning families vary from those of families who struggle to adapt to their child. During the interview process it seemed that there were two or three families who struggled with their routines, and another five who seemed to function very well. However, without quantitative measures I could not verify this impression. If such psychological instruments were included in future studies, one would be able to make more substantial comparisons between well-functioning, resilient families and struggling families. Fiese et al. (2002) also recommend that future researchers add clinical samples so that one can get a better picture of more disorganised family environments. Lastly, as this is a qualitative study with little statistical validity and reliability, there exists a need for future researchers to verify the findings of this research with quantitative investigations.

Thus, research on family routines still has major gaps to address, but it is my hope that this qualitative investigation gives further direction and purpose to the study fields of family routines and the transition to parenthood in South Africa.

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**ADDENDUM A**  
**INFORMATION FOR DAY CARE CENTRE**



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**INFORMATION CONCERNING THE RESEARCH STUDY**

**Family routines during the adjustment and adaptation process after the transition to parenthood**

The research study will be conducted by Christine de Goede, BAHons (Psychology) from the Department of Psychology at the University of Stellenbosch. This study forms part of a Masters degree in Psychology at the University of Stellenbosch. The results of this study will contribute to a thesis and a possible research article. Families who will be asked to participate in this study will be couples who, during the past one to four years, became parents for the first time. To be more specific, they will need to fulfil all three of the following criteria:

- a) their oldest child must be between 1 and 4 years of age
- b) they must be the biological mother and biological father of the child
- c) and they must stay in the same house

**1. PURPOSE OF THE STUDY**

The purpose of this study is to gain a better understanding of what family routines look like and how they work in families with young children.

**2. PROCEDURES**

If participants volunteer to participate in the study, we would ask them to do the following things:

Both parents will have to participate, at the same time, in an interview with the researcher. With your permission, the interview will take place at the day care centre or else it will be held in the privacy and comfort of participants' own home, at a time that suits them best. During the interview they will be asked questions about their daily routines. The interview will take approximately 45 min. They will also be asked to complete a short, one page biographic questionnaire.

**3. POTENTIAL RISKS AND DISCOMFORT**

Participation in the study will cause no foreseeable risks, discomforts and inconveniences.

## **INFORMATION FOR DAY CARE CENTRE (continued)**

### **4. POTENTIAL BENEFITS TO SUBJECTS AND/OR TO SOCIETY**

Numerous studies have recognised that healthy, functional family routines hold benefits for the development of every individual within the family, especially the child. Furthermore, it has also been pointed out that having effective family routines may help families cope better when they are confronted by crisis situations.

Participation in this study will give families the opportunity to think about their family's routines; how it impacts on their life; what aspects about their family's routines are important to them; and which areas of their family routines they would like to strengthen or improve.

Furthermore, their participation in this study can help to acquire necessary information about the everyday lives of different South African families. This important information can then inform other similar families about daily routines, and can help them to overcome their own challenges.

This knowledge can also be used in the future to develop good intervention programs for parents that experience problems after the birth of their first child.

### **5. PAYMENT FOR PARTICIPATION**

Although they will not be paid for participating in the study, they will receive a small gift at the end of the study as a token of appreciation for their participation.

### **6. CONFIDENTIALITY**

Any information that is obtained through this research and that can be identified with participants will remain confidential and will be disclosed only with their permission or as required by the law. Confidentiality will be maintained by means of storing all the gathered information (biographical questionnaire and interview) in a locked cabinet and only the researcher and her study leader will have access to these documents.

If activities are to be audio- or videotaped, they will have the right to review/edit the tapes. Only the researcher and her study leader will have access to the tapes. After 5 years the tapes will be wiped clean and the questionnaire will be destroyed.

When data is written up and published, no recognizable information about participants will ever be used and no names will ever be mentioned.

### **7. PARTICIPATION AND WITHDRAWAL**

Participants can choose on their own whether to be in this study or not. If they volunteer to be in this study, they may withdraw at any time without any negative consequences. They may also refuse to answer specific questions and still remain in the study. The investigator may withdraw participants from this research if circumstances arise which warrant doing so.

## **INFORMATION FOR DAY CARE CENTRE (continued)**

### **8. IDENTIFICATION OF INVESTIGATORS**

If you have any questions or concerns about the research, please feel free to contact the researcher, Christine de Goede, (via email at [14344688@sun.ac.za](mailto:14344688@sun.ac.za) or via telephone at 082 294 4270) or the study leader, Professor Greeff (via email at [apg@sun.ac.za](mailto:apg@sun.ac.za) or via telephone at 021 808 3464) or you can go to the Department of Psychology, Van Ryneveld Street, Stellenbosch.

### **9. RIGHTS OF RESEARCH PARTICIPANTS**

You may withdraw your consent at any time and discontinue participation without any negative consequences. You are not waiving any legal claims, rights or remedies because of your participation in this research study. If you have questions regarding your rights as research participant, contact Ms Maléne Fouché ([mfouche@sun.ac.za](mailto:mfouche@sun.ac.za); 021 808 4622) at the Division for Research Development at the University of Stellenbosch.

### **10. YOUR BUSINESS/ORGANIZATION'S INVOLVEMENT**

As a respected business within the community we would like to ask your help and support in gaining access to potential participants that make use of your services. The recruitment process will start in the beginning of 2010. The following assistance from you would be of great help:

- 1) Support in getting study information to potential participants by distributing an explanatory letter that we will provide.
- 2) Providing us with a list of parents who would be interested in participating.
- 3) If at all possible, but not essential, providing us with an available room to conduct interviews in.

Your involvement is voluntary and can be withdrawn at any time without suffering any consequences. When data is written up and published your business's involvement will remain confidential. Thank you sincerely for taking the time out of your busy schedule to meet with us.



**INFORMATION FOR DAY CARE CENTRE (continued)**

**SIGNATURE OF BUSINESS REPRESENTATIVE**

The information above was given and described to \_\_\_\_\_ [*name of person representing day care center*] by Christine de Goede in English and I am in command of this language. I was given the opportunity to ask questions and these questions were answered to my satisfaction.

I, and the business I represent, hereby consent voluntarily to participate in the research study. I have been given a copy of this form.

\_\_\_\_\_

**Name of Representative**

\_\_\_\_\_

**Name of business**

\_\_\_\_\_

**Signature of Representative**

\_\_\_\_\_

**Date**

**SIGNATURE OF INVESTIGATOR**

I declare that I explained the information given in this document to \_\_\_\_\_. He/she was encouraged and given ample time to ask me any questions. This conversation was conducted in English and no translator was used.

\_\_\_\_\_

***Signature of Investigator***

\_\_\_\_\_

***Date***

## **ADDENDUM B**

### **PARTICIPANT CONSENT FORM**



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#### **CONSENT TO PARTICIPATE IN THE RESEARCH PROJECT:**

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##### **Family routines during the adjustment and adaptation process after the transition to parenthood**

You are asked to participate in a research study conducted by Christine de Goede, BAHons (Psychology) from the Department of Psychology at the University of Stellenbosch. This study forms part of a Master's degree in Psychology at the University of Stellenbosch. The results of this will contribute to a thesis and a possible research article. You were selected as possible participants in this study because between one and four years ago you become parents for the first time. To be more specific, you fulfil the following three criteria:

- a) your oldest child is between 1 and 4 years of age
- b) you are both the biological mother and biological father of this child
- c) and all of you stay in the same house

#### **1. PURPOSE OF THE STUDY**

The purpose of this study is to gain a better understanding of what family routines look like and how they work in families with young children.

#### **2. PROCEDURES**

If you volunteer to participate in this study, we would ask you to do the following things:

Both parents will have to participate, at the same time, in an interview with the researcher. The interview will take place at the day care centre or in the privacy and comfort of your own home, at a time that suits you best. During the interview you will be asked questions about your daily routines. The interview will take approximately 45 min. You will also be asked to complete a biographical questionnaire consisting of one page.

#### **3. POTENTIAL RISKS AND DISCOMFORTS**

There are no foreseeable risks, discomforts and inconveniences that will be caused by participation in this study.

## **PARTICIPANT CONSENT FORM (continued)**

### **4. POTENTIAL BENEFITS TO SUBJECTS AND/OR TO SOCIETY**

Participation in this study could give you the opportunity to think about your family's routines; how it impacts on your life; what aspects about family routines are important to you; and which areas of your family routines you would like to strengthen or improve.

Furthermore, your participation in this study can help to acquire necessary information about the everyday lives of South Africa families. This important information can then teach other similar families more about family routines and help them to overcome their own challenges.

This knowledge can also be used in the future to develop good intervention programs for parents that experience problems after the birth of their first child.

### **5. PAYMENT FOR PARTICIPATION**

Although you will not be paid for participating in the study, you will receive a small gift at the end of the study as a token of appreciation for your participation.

### **6. CONFIDENTIALITY**

Any information that is obtained through this research and that can be identified with you will remain confidential and will be disclosed only with your permission or as required by the law. Confidentiality will be maintained by means of storing all the gathered information (biographical questionnaire and interview) in a locked cabinet and only the researcher and her study leader will have access to these documents.

If activities are to be audio- or videotaped, you have the right to review/edit the tapes. Only the researcher and her study leader will have access to the tapes. After 5 years the tapes will be wiped clean and the questionnaires will be destroyed.

When data is written up and published, no recognizable information about you will ever be used and no names will ever be mentioned.

### **7. PARTICIPATION AND WITHDRAWAL**

You can choose on our own whether to be in this study or not. If you volunteer to be in this study you may withdraw from it at any time without any negative consequences. You may also refuse to answer some questions but still remain in the study. The investigator may withdraw you from this study if circumstances arise that make it necessary.

## **PARTICIPANT CONSENT FORM (continued)**

### **8. IDENTIFICATION OF INVESTIGATORS**

If you have any questions or concerns about the research, please feel free to contact the researcher, Christine de Goede, (via email at [14344688@sun.ac.za](mailto:14344688@sun.ac.za) or via telephone at 082 294 4270) or the study leader, Professor Greeff (via email at [apg@sun.ac.za](mailto:apg@sun.ac.za) or via telephone at 021 808 3464) or you can go to the Department of Psychology, Van Ryneveld Street, Stellenbosch.

### **9. RIGHTS OF RESEARCH PARTICIPANTS**

You may withdraw your consent at any time and discontinue participation without any negative consequences. You are not waiving any legal claims, rights or remedies because of your participation in this research study. If you have questions regarding your rights as research participant, contact Ms Maléne Fouché ([mfouche@sun.ac.za](mailto:mfouche@sun.ac.za); 021 808 4622) at the Division for Research Development at the University of Stellenbosch.

**PARTICIPANT CONSENT FORM (continued)**

**SIGNATURE OF RESEARCH PARTICIPANT**

The information above was given and described to \_\_\_\_\_ [*name of participant*] by Christine de Goede in English and I am in command of this language. I was given the opportunity to ask questions and these questions were answered to my satisfaction.

I hereby consent voluntarily to participate in this study. I have been given a copy of this form.

\_\_\_\_\_

**Name of Participant**

\_\_\_\_\_

**Signature of Participant**

\_\_\_\_\_

**Date**

**SIGNATURE OF INVESTIGATOR**

I declare that I explained the information given in this document to \_\_\_\_\_. He/she was encouraged and given ample time to ask me any questions. This conversation was conducted in English and no translator was used.

\_\_\_\_\_

**Signature of Investigator**

\_\_\_\_\_

**Date**

## ADDENDUM C

### BIORAPHICAL INFORMATION QUESTIONNAIRE

All information in this questionnaire is strictly confidential and your information will be anonymously processed.  
Please answer all the questions.

Today's date:		What is your home language:	
Your name and surname			
The name and surname of your partner:			
Your age:		Your partner's age:	
Your gender:		Your partner's gender:	
How many children do you have?			
How long have you been a couple?			

Please indicate the age and gender of each child:		
Child	Age (In years <u>and months</u> )	Gender
1.		
2.		
3.		
4.		
5.		

What is the highest level of education you have obtained? (Please mark the appropriate box)		Primary School	High School	Diploma	Degree	None
What is the highest level of education your partner has obtained? (Please mark the appropriate box)		Primary School	High School	Diploma	Degree	None
Are you currently employed?		Are you permanently employed?		What is your occupation?		
Is your partner currently employed?		Is your partner permanently employed?		What is your partner's occupation?		
Approximately what is your family's monthly income? (Please mark the appropriate box)		Less than R5 000	R5 000 to R10 000	R10 000 to R20 000	R20 000 to R30 000	More than R30 000

## **ADDENDUM D**

### **INTERVIEW SCHEDULE**

- 1 I would like to know more about what a *typical* weekday looks like for your family. During this interview, I will ask you about different times during a typical day and ask you to describe the activities you do during those times. I will also ask you to describe how these activities unfold; who is involved in these activities; why these activities and routines are important to you; what concerns you about these daily routines; how you manage to keep these routines going; which activities you are trying to encourage, and why; and which activities you are trying to change, and why. When you take me through your day, please be specific and give as much detail as you can.
  - 1.1 What happens in the mornings when you first wake up?
  - 1.2 What happens after your early morning routine?
  - 1.3 What do you typically do during the early afternoon?
  - 1.4 What do you typically do during the late afternoon?
  - 1.5 What do you usually do early in the evening?
  - 1.6 What do you usually do late in the evening?
  
- 2 The next section of the interview will focus on a typical weekend and what this looks like for your family. It will follow the same structure as the questions we just discussed.
  - 2.1 What do you usually do on a Friday evening?
  - 2.2 What do you usually do on a Saturday morning?
  - 2.3 What do you usually do during your Saturday afternoons?
  - 2.4 What do you usually do during your Saturday evenings?
  - 2.5 What do you usually do on Sunday mornings?
  - 2.6 What do you usually do during your Sunday afternoons?
  - 2.7 What do you usually do during your Sunday evenings?

### INTERVIEW SCHEDULE (continued)

**Note to the interviewer:** at each timeframe above, the answers to the following questions should be obtained if the participants did not state them spontaneously.

- Who is involved in the activity?
- How does the activity usually unfold?
- Why are these activities and routines important to you?
- What is the goal with these activities?
- What would the consequences be if you did not do these activities?
- How did you come up with this routine?
- What concerns you about these activities and routines?
- How do you manage to keep your routines going?
- Do you think this routine works for your family?
- Which activities are you trying to encourage, and why?
- Which activities are you trying to change, and why?

**For the next two questions, first explain:** “Before a couple, such as yourself, has children they have a specific routine that they follow, but when they become first-time parents they find they have to adapt to the new situation and make certain changes in their routine to make room for their new child.”

- How has the arrival of your child/children changed the routines you use to follow during this time of day?
- If one looks at this time of day, what changes have *you* made to your old routine in order to cope with the new baby?